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ABSTRACT

This KIDS COUNT report examines trends in the status of South Carolina children on a state-wide and county basis. The statistical portrait is based on 32 indicators of well-being, grouped into 6 categories: (1) family (family characteristics, child neglect/abuse); (2) economic status (poverty, mean family income); (3) health (prenatal care, immunization, cigarette smoking); (4) readiness and early school performance (grades 1-3); (5) school achievement (including special education and dropout rate); and (6) adolescent risk behavior (pregnancy, alcohol and drug use). Data are analyzed in detail and summarized in tabular form at the end of each state/county report; tables summarize data for the most recently available year and trends over the last three comparable periods. The report finds that too many children in the state are at risk of not growing up to be self-supporting adults, with 25.1 percent of them in single-parent families, 21.0 percent in poverty, 27.3 percent dropping out of school, and 37.4 percent of high school students using alcohol and 20.7 percent using drugs each month. (EAJ)

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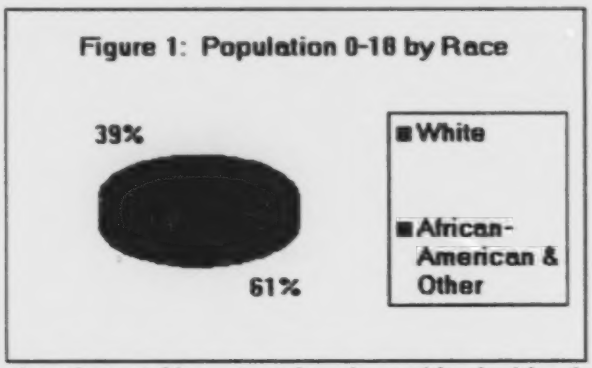
1996 Report SOUTH CAROLINA

kids count '96 Demographics

In 1994, there were 973,000 children under age 18 in the state. Of these, 595,500 were White, 377,500 were African-American and Other races. There were 941,966 children under age 18 in 1980, 955,163 in 1970, and 992,476 in 1960.

Children represent a shrinking portion of the state's population. Those under 18 constituted 26.6 % of the population in 1994, down from 41.7 % in 1960, 36.9 % in 1970 and 30.2 % in 1980.



* In all other charts African-American is combined with other races.

kids count Family

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 35.5 % of all households in 1990, as compared with 49.0 % of households in 1960, had children below the age of 18.

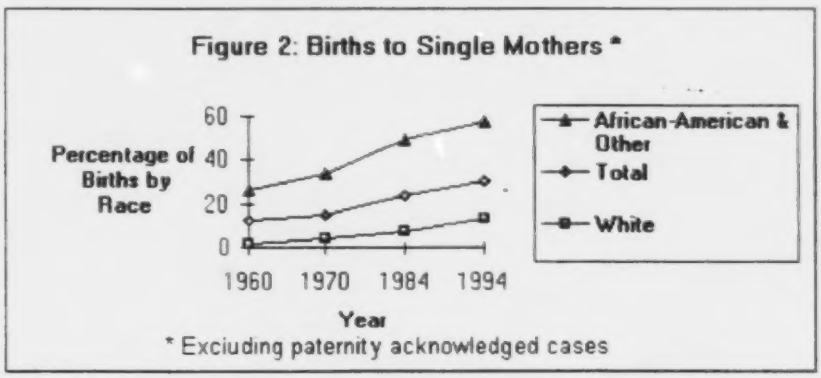
Births to Teen Mothers: In 1994, 3,768 babies were born to mothers younger than age 18. These babies were 7.3 % of all children born in the state; 4.6 % of all White babies and 11.4 % of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 76.6 % were born to single mothers.

In 1994, 8,835 babies were born to mothers younger than age 20. These babies were 17.0 % of all children born in the state; 12.3 % of all White babies and 24.5 % of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 67.3 % were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 11,304 babies, 21.8 % of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 44.6 % in 1970.

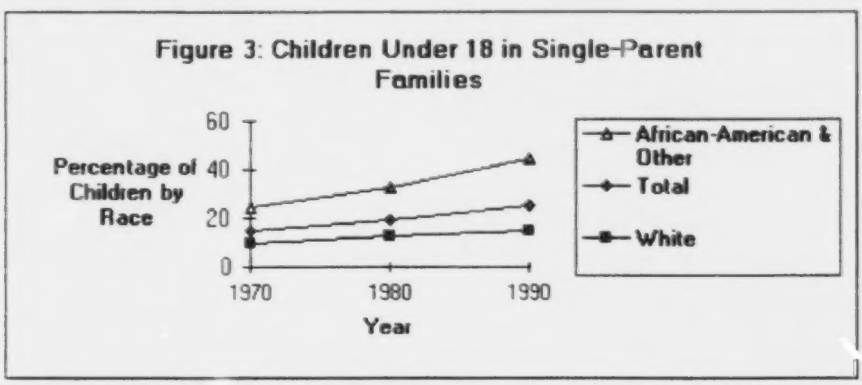
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 15,767 babies, 30.4 % of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 23.6 % and in 1960 it was 12.3 %. In 1994, 13.2 % of White children and 57.8 % of African-American and Other children were born to single mothers.

To these numbers shold be added an additional group of 3,367 babies, 6.5 % of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 19,134 , constituting 36.9 % of all babies, 18.7 % of White babies, and 65.8 % of African-American and Others.



Divorce Rate: In 1994, 51,564 marriage licenses were issued, while 15,802 divorce decrees involving 13,129 children were filed. In 1970 only 6,741 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 200,590 children lived with only one parent. This was 25.1 % of all children, up from 18.9 % in 1980 and 14.5 % in 1970. In 1990, 14.5 % of White children and 44.6 % of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 66.7 % of mothers with children under 6 and 78.0 % with children 6 - 17 were in the labor force. This has increased substantially from 36.8 % of mothers with children under 6 in the labor force in 1960. Most fathers also worked. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 37,947 children investigated as alleged child abuse and neglect victims: 31.6 % for physical abuse, 11.0 % for sexual abuse, 67.7 % for neglect, and 35.1 % for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 9,436 children were victims of abuse and neglect: of these 47.3 % were male and 52.7 % were female; 46.9 % were White, and 53.1 % were African-American and Other. By age, 41.6 % were 0 - 5, 38.1 % were 6 - 12, and 20.3 % were 13 - 17. They constituted 1.0 % of all children age 18 or younger; 0.7 % of all Whites and 1.3 % of all African-Americans and Others. In the verified cases, 27.2 % of abused and neglected children lived in two parent families, 46.0 % in single parent families, 7.6 % with extended families, and 19.1 % in other circumstances.

Family Violence: In 1994, 29,541 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 31.0 % of all assaults, which include both simple and aggravated assaults. Overall, 59.4 % of all domestic assaults involve spouse abuse (constituting 18.2 % of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 5.1 % of all children did not live with their natural parents; of these, 31,302 or 3.4 % of children lived with relatives, 12,231 or 1.3 % lived with non-relatives, and 3,615 were in institutional facilities.

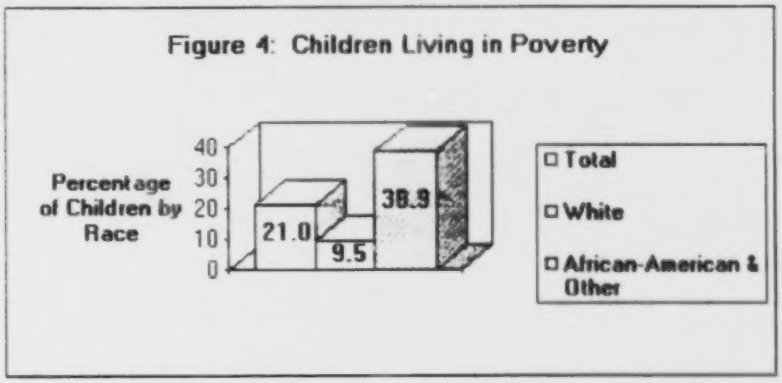
Out of Home Placements: As of September 30, 1996, 4,761 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 14.5 % 0-2, 14.9 % 3-5, 23.8 % 6-10, 15.2 % 11-13, and 31.6 % 14 and above. The foster care population is comprised of 49.8 % males and 50.2 % females. Regarding their future, 24.3 % were under a plan for placement in adoptive homes, 45.5 % for return to a parent or guardian, 4.9 % for placement with a relative, 11.7 % for independent living, 12.7 % for permanent foster care, and 0.6 % for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.77 adults for every person below age 18. This was up substantially from 1960, when there were only 1.40 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

kids count *Economic Status*

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 190,873 children and youth under the age of 18 lived in families with incomes below poverty. Over 21.0 % of all children and youth lived below poverty: 9.5 % of Whites and 38.9 % of African-Americans and Others.



Poverty has always been a serious problem. While the rate among children under age 18 was 21.0 % in 1989, it was 21.2 % in 1979 and 28.7 % in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 22.6 % of children 0 - 5 and 20.2 % of children 6 - 17 lived in poverty; 20.5 % of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 50.0 % of children in single-parent families lived in poverty, but only 9.3 % of children in married-couple families were poor. Children in single-parent families made up 67.0 % of all the state's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 247,685 children ages 0-17 who were less than 125 percent of poverty; thus an additional 56,812 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below X% of Poverty					
		100%	125%	150%	175%	185%	200%
Total	909,732	190,873	247,685	304,082	365,384	388,474	421,310
percent		21.0 %	27.2 %	33.4 %	40.2 %	42.7 %	46.3 %
White	554,000	52,430	77,388	104,488	138,155	151,235	171,548
percent		9.5 %	14.0 %	18.9 %	24.9 %	27.3 %	31.0 %
African-American & Others	355,732	138,443	170,297	199,594	227,229	237,239	249,762
percent		38.9 %	47.9 %	56.1 %	63.9 %	66.7 %	70.2 %

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers such as lack of transportation or a phone that prevent them from becoming self-sufficient. In the state in 1990, 10.9 % of households did not have a car; 5.7 % of Whites and 25.1 % of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for

employment. Approximately 9.1 % of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 19.0 % of households had no phone.

Income: The mean income of families with children in 1989 was $35,561 ; in 1979, it had been $33,061 , adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, state real dollar per capita income (eliminating inflation) changed by 6.7 %

The mean income of single-parent families with children was $15,548 in 1989, as compared with $41,991 in married-couple families with children.

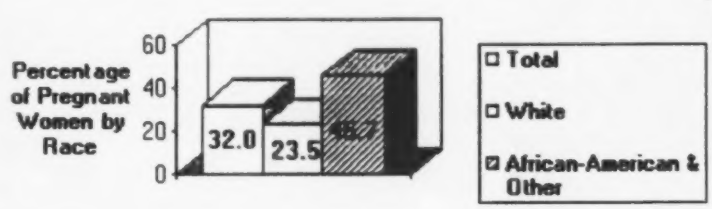
Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 49,678 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 36.9 % had child support court orders. The average monthly payment of child support was $148.91 , including child support receipts and tax refund intercepts. In addition, during fiscal year 1995 an estimated 22,538 parents in non-AFDC families were obligated to pay a monthly average of $189.92 . Information is not available regarding the amount actually paid.

kids count *Health*

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994,12,292 or 23.7 % of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 16,632 or 32.0 % of pregnant women received less than adequate prenatal care: 7,497 or 23.5 % of Whites and 9,135 or 45.7 % of African-Americans and Others. In that same year, 825 women received no prenatal care at all.

Figure 5: Less than Adequate Prenatal Care



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 4,760 or 9.2 % of all babies in the state were born with low birthweight. Over 13.1 % of

African-American babies and 6.7 % of White babies were born with low birthweight. During 1992-94, approximately 2,885 or 1.8 % of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 34.6 %. For Whites the rate decreased by 40.4 %, while for African-Americans and Others the rate decreased by 29.0 %. Over the three-year period 1992-94, 672 White and 946 African-American and Other infants died before age one. By comparison, 1,051 White and 1,287 African-American and Other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 386 White and 421 African-American and Other children ages 1-14 died in the state. During 1982-84, 479 White and 390 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 52.1 % of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as polio, measles, diphtheria, tetanus, Haemophilus influenza b and whooping cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the state to 18.0 %. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the state. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 38,110 to 57,165 youth ages 13-19 in the state were infected with a STD. In the state, there were 224 reported cases of children under age 15 and 2,995 youth ages 15 - 19 infected with gonorrhea; 43 youth ages 15-19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegtables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that

made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 13.8 % first smoked by age 11, 30.8 % by age 13, and 42.7 % by age 15. In a typical month, 14.7 % of 7th and 8th graders and 23.1 % of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 29.2 % of White 7th to 12th graders used cigarettes, in comparison with 6.6 % African-Americans. A smaller but significant group of high school students (8.2 %) used smokeless tobacco monthly; it was used primarily by White males (23.1 %) compared with 2.3 % of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 97,300 children and youth under age 18 in the state are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 32,524 students in grades 1-12 with learning disabilities and 18,328 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 64,280 children and youth in the state with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide last year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% or 144,004 of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. The number lacking basic accessible

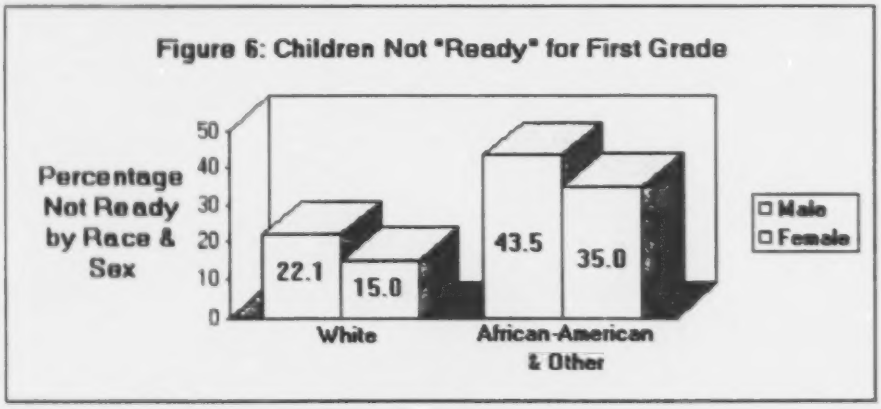
primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the state this would suggest the need for 846 nurses; 361 are currently available.

Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the state under the age of 18, the share was 30.0 % for Whites and 36.3 % for African-Americans and Others in 1995.

kids count *Readiness & Early School Performance*

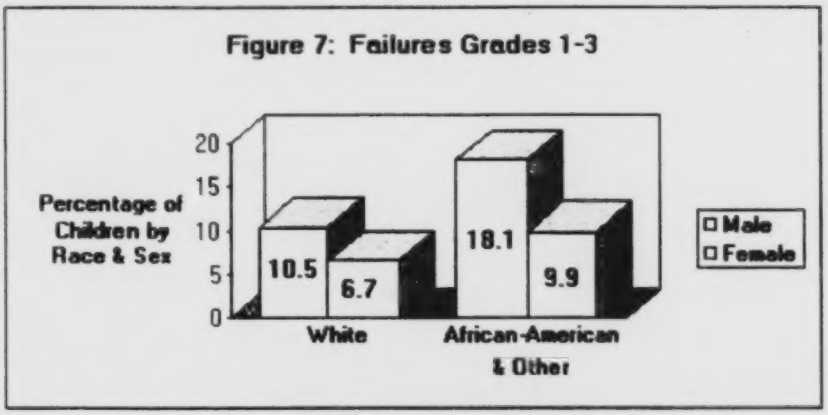
Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB)	
15,394 children not ready	28.1 % children not ready



1st Grade Failures in 1995:	
3,689 children failing	6.8 % children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:	
6,000 children failing	11.3 % children failing



Overage for Grade 3 in 1996:	
7,539 children overage	16.2 % children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 15,299 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 15.3 % of their age group.

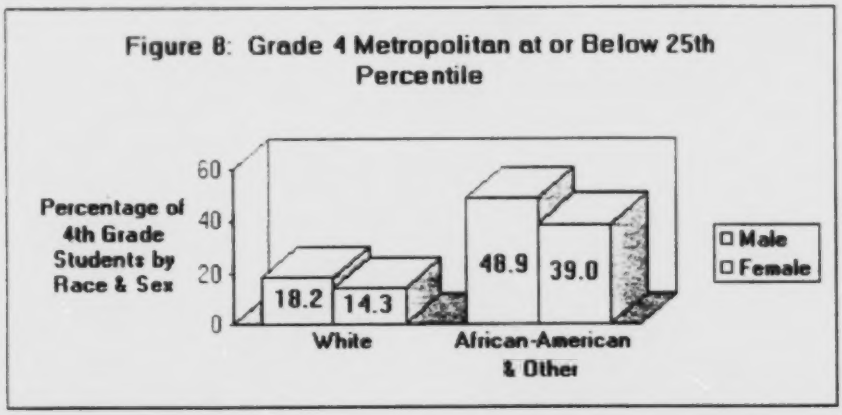
Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 28.1 % assessed not ready for the 1st grade, 16.2 % overage in grade 3, and 15.3 % of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

kids count *School Achievement*

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing state performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

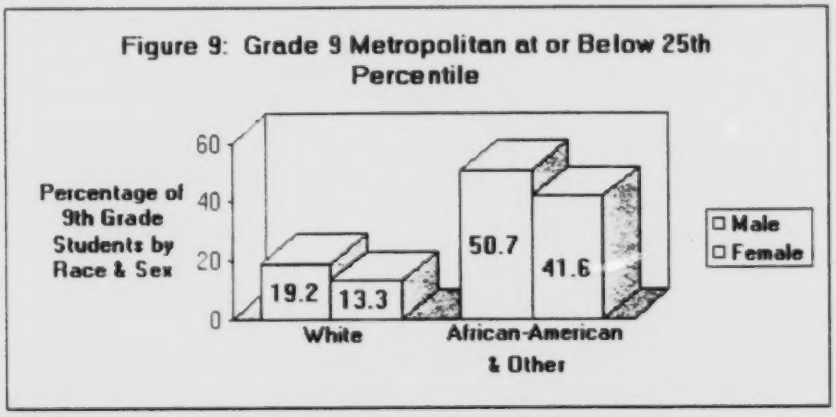
Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that cannot be accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 18,328 speech and language impaired, 32,524 learning disabled, 4,971 emotionally disabled, 15,923 mentally impaired, and 3,602 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 13.0 % of all students in grades 1 - 12 during 1995-6.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996: (i.e. below 75% of students nationwide)	
12,933 children at or below 25th percentile	27.9 % children at or below 25th percentile

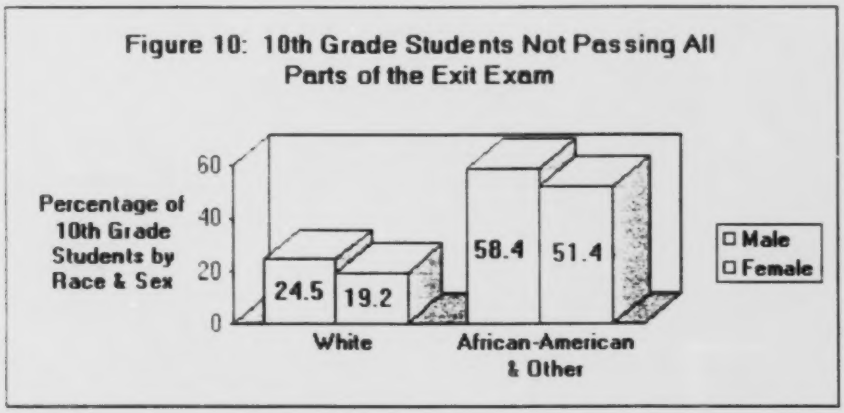


BSAP (Basic Skills Assessment Program)-not meeting state minimum standards in grade 8 in 1996			
Math		Reading	
NUMBER	PERCENT	NUMBER	PERCENT
16,720	34.8	13,782	28.8

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996: (i.e. below 75% of students nationwide)	
14,410 students at or below 25th percentile	29.5 % students at or below 25th percentile

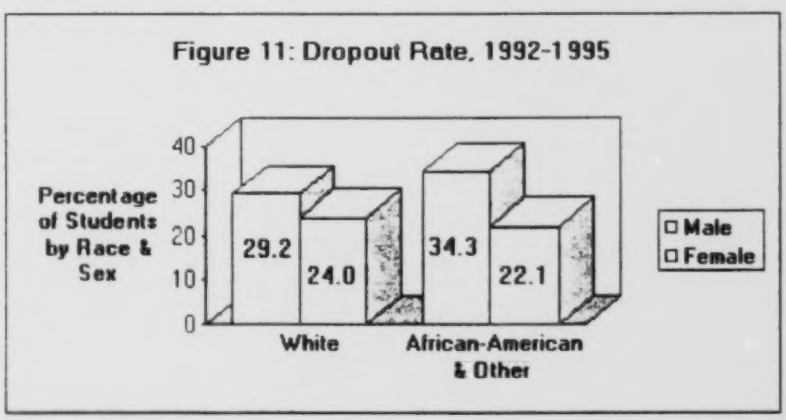


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996	
14,256 students not passing all parts	35.3 % students not passing all parts



Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the state who did not meet standards declined from 57.4 % to 27.5 % in math and from 49.1 % to 23.0 % in reading. During the 1990s the trend altered, with 34.8 % not meeting 8th grade math standards in 1996 and 28.8 % in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of state 4th grade students at or below the 25th percentile of national norms was 28.2 % in 1983 on the CTBS, 31.4 % in 1990 on the Stanford, and 30.6 % in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 31.7 % in 1990 and 29.5 % in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12: (average of students for the four years ending 1992 - 95)	
52,368 students drop out	27.3 % students drop out



Dropouts: A distressing number of students drop out and fail to graduate. An average of 31.6 % of 8th graders failed to graduate from state schools five years later during the period 1980-84, 30.1 % during 1985-89, and 30.4 % during 1990-94. During the 1995-96 period, 94.5 % of all who did graduate received the State High School Diploma, while 2.6 % received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 2.9 % received a District Certificate.

Fortunately, a significant number of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95 2,624 Adult Education high school diplomas were awarded to school completers in the state. During 1995, 4,591 GEDs were awarded in the state. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 19.1 % of state resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 27.3 % to 35.3 %. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

kids count *Adolescent Risk Behaviors*

Not in School or Employed: Idleness was the condition of 21,746 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 9.6 % of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

6.3 % White Males 11.7 % African-American and Other Males
9.8 % White Females 13.0 % African-American and Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy often occurs when children prematurely become sexually active. In the state, 4,738 girls between the ages of 14 and 17 became pregnant in 1993 and 5,079 in 1994. In 1994, this represented 4.8 % of all girls ages 14 - 17; several times this percentage became pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 3.3 % for Whites and 7.0 % for African-Americans and Others. Of all pregnancies to 14-17 year olds, 73.1 % resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen pregnancy rate decreased by 13.9% statewide.

Alcohol Use: In 1992-93, 20.8 % of 7th and 8th graders and 37.4 % of high schoolers said they had used alcohol in the past month. Of White males, 36.1 % had used it in the past month, compared with 30.0 % of African-American males; likewise, 32.7 % of White females said they had used alcohol, compared with 21.2 % of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 16.2 % had used alcohol by age 11 or younger, 36.1 % by age 13, and 58.3 % by age 15. During the previous year, 33.1 % of 7th and 8th graders and 42.5 % of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 28.8 % said they had

driven after drinking, and 10.0 % of seniors said they had attended school while under the influence of alcohol.

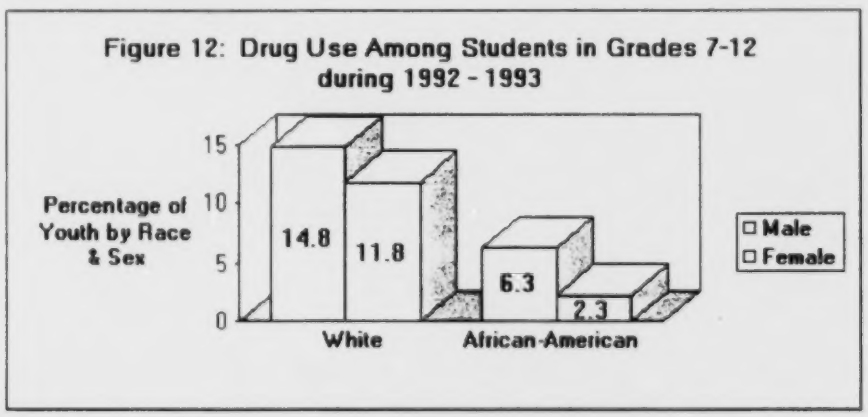
Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 58.2 % of eighth graders and 87.2 % of seniors felt that beer was easy to get; 50.9 % of eighth graders and 48.5 % of seniors felt there was not a great risk in using it regularly.

No county level surveys of alcohol or drug use have been administered since 1992-93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 28.1 % of all high school students in 1992-93 responded 3 or more drinks at a time; 16.3 % of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 5.6 % of 7th and 8th graders and 12.8 % of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (14.8 %) and White females (11.8 %), use among African-American males was 6.3 %; African-American females, 2.3 %. Some young people first used drugs at an early age: among students 15 and older, 3.0 % experienced their first use by age 11 or sooner; 8.6 % had used a drug by age 13, and 17.3 % by age 15. Of seniors who had initiated use of marijuana, 9.7 % had started use at home, 44.1 % at a friend's home, and 46.2 % elsewhere. During the past year, 4.0 % of all high school students said that they used marijuana at home, 9.2 % at a friend's house, and 6.3 % in a car. In the past year, 6.6 % of all high school students who drive and 10.5 % of seniors who drive said that they had driven after using drugs . Furthermore, 7.7 % of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 28.3 % of 8th graders who had an opinion said it is easy to get marijuana and 20.9 % said it is easy to get cocaine or crack; 75.2 % of seniors who had an opinion said it is easy to get marijuana and 59.8 % cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995.



Juvenile Delinquency: In 1994-95, 19,167 individual juvenile offenders in the state were referred to

the Solicitor; 13.3 % were age 12 or younger, 31.3 % were 13 or 14, and 55.3 % were 15 or older.

Of the referrals to the family court, 13.7 % of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 3,979 juvenile cases constititing 15.2 % of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

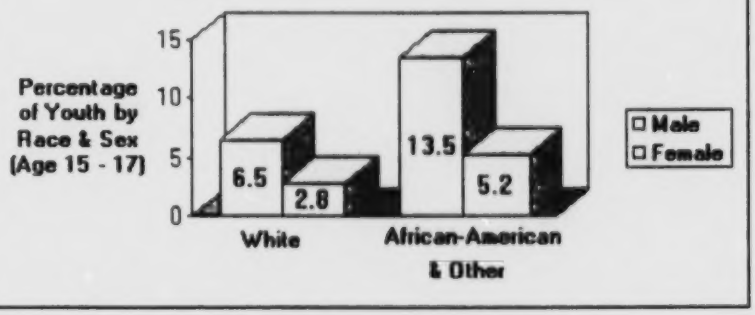
Delinquents are likely to live in families with low income: 38.9 % lived in families with income under $10,000, 31.9 % with $10,000-$19,999 and 29.2 % with $20,000 or more. Furthermore, only 22.6 % of delinquents lived with both natural parents, while 50.5 % lived in a single parent household and 26.9 % lived with other relatives. Delinquency or criminal activity occurs among many related family members: 36.9 % had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 33.2 % had at least one prior referral and 13.5 % had been referred to court 3 times or more.

In 1994-95, there were 1,071 juvenile commitments to state institutions.

During 1994-95, 10,563 youth ages 15 to 17 were referred to the family courts. In the state 6.4 % of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.

Figure 13: Court Referrals



Deaths: During 1990-94, 1,255 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 527 deaths between 1990 and 1994; homicides killed 208 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

kids count *Summary*

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the state. The 25.1 % of children in single-parent families, 21.0 % in poverty, 27.3 % dropping out of school, 37.4 % of high school students using alcohol and 20.7 % using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults,

good family members, and responsible community citizens.

SOUTH CAROLINA

		Percent		Problem Rate		
	Number	County	State	County/State	Rank	Year
Family						
Births to Teen Mothers	3,768	7.3	7.3	1.00	0	1994
Births to Mothers Not Completing High School	11,304	21.8	21.8	1.00	0	1994
Births to Single Mothers	15,767	30.4	30.4	1.00	0	1994
Children in Single-Parent Families	200,590	25.1	25.1	1.00	0	1990
Parents Working	0	0.0	74.3	1.00	0	1990
Abuse & Neglect Victims	9,436	1.0	1.0	1.00	0	1995-96
Separation from Parents	0	5.1	5.1	1.00	0	1990
Economic Status						
Poor Children	190,873	21.0	21.0	1.00	0	1989
Mean Income of Families with Children	$35,561	NA	NA	1.00	0	1989
Health						
Less than Adequate Prenatal Care	16,632	32.0	32.0	1.00	0	1994
Low Birth Weight	4,760	9.2	9.2	1.00	0	1994
Not Adequately Immunized	11,226	18.0	18.0	1.00	0	1995
Cigarette Smokers (High School)	32,942	23.1	23.1	1.00	0	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	15,394	28.1	28.1	1.00	0	1994-95
1st Grade Failures	3,689	6.8	6.8	1.00	0	1994-95
Failures grades 1-3 (approx. %)	6,000	11.3	11.3	1.00	0	1994-95
Overage for Grade 3	7,539	16.2	16.2	1.00	0	1995-96
Special Education ages 8 and 9	15,299	15.3	15.3	1.00	0	1995-96
School Achievement						
Special Education Grades 1 - 12	75,348	13.0	13.0	1.00	0	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	12,933	27.9	27.9	1.00	0	1995-96
Grade 8 BSAP - Math (Below standards)	16,720	34.8	34.8	1.00	0	1995-96
Grade 8 BSAP - Reading (Below standards)	13,782	28.8	28.8	1.00	0	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	14,410	29.5	29.5	1.00	0	1995-96
Exit Exam (Not passing all parts on 1st attempt)	14,256	35.3	35.3	1.00	0	1995-96
Dropout Rate	52,368	27.3	27.3	1.00	0	1992-95
25-34 Year olds with no HS Degree or GED	114,120	19.1	19.1	1.00	0	1990
Adolescent Risk Behavior						
Not in School or Employed	21,746	9.6	9.6	1.00	0	1990
Pregnancy (Ages 14-17)	5,079	4.8	4.8	1.00	0	1994
Alcohol Use (High School)	53,334	37.4	37.4	1.00	0	1992-93
Drug Use (High School)	18,253	12.8	12.8	1.00	0	1992-93
Binge Drinking (5 or more drinks)	23,245	16.3	16.3	1.00	0	1992-93

Deliquency (ages 15-17)	10,563	6.4	6.4	1.00	0	1994-95

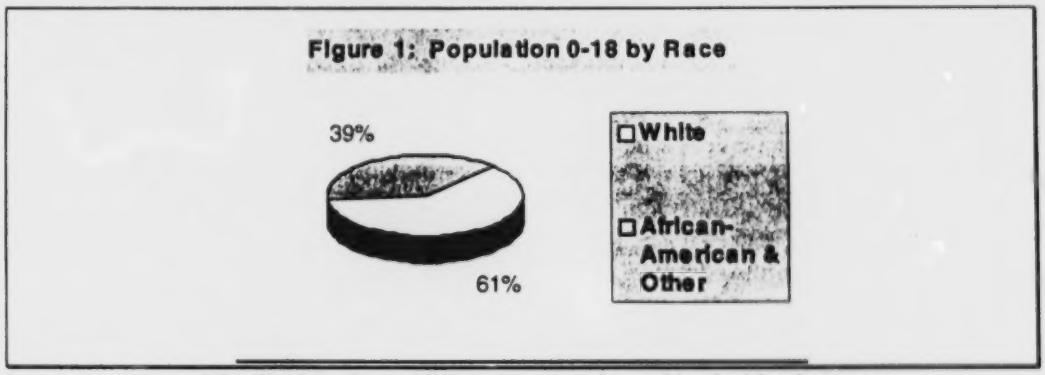
kids count SOUTH CAROLINA

1996 Report SOUTH CAROLINA

DEMOGRAPHICS

In 1994, there were 973,000 children under age 18 in the state. Of these, 595,500 were White and 377,500 were African-American and Other races. There were 941,966 children under age 18 in 1980, 955,163 in 1970, and 992,476 in 1960.

Children represent a shrinking portion of the state's population. Those under 18 constituted 26.0% of the population in 1994, down from 41.7% in 1960, 36.9% in 1970 and 30.2% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 35.5% of all households in 1990, as compared with 49.0% of households in 1960, had children below the age of 18.

Births to Teen Mothers: In 1994, 3,768 babies were born to mothers younger than age 18. These babies were 7.3% of all children born in the state; 4.6% of all White babies and 11.4% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 76.6% were born to single mothers.

In 1994, 8,835 babies were born to mothers younger than age 20. These babies were 17.0% of all children born in the state; 12.3% of all White babies and 24.5% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 67.3% were born to single mothers.

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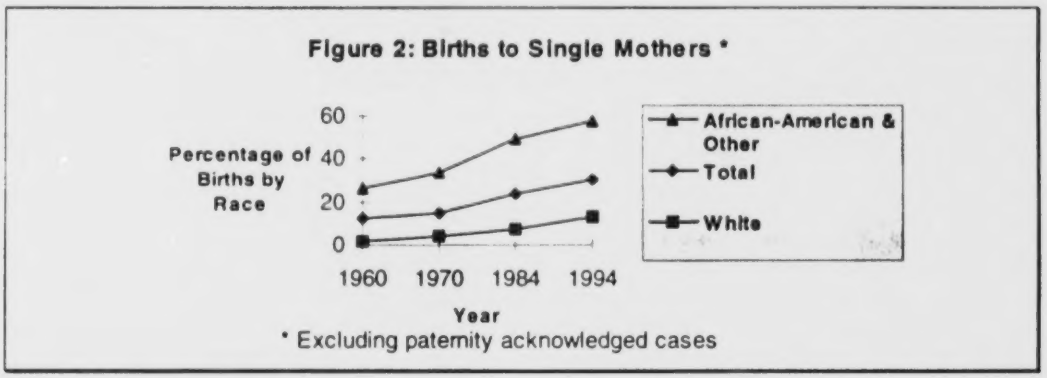
Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 11,304 babies, 21.8% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 44.6% in 1970.

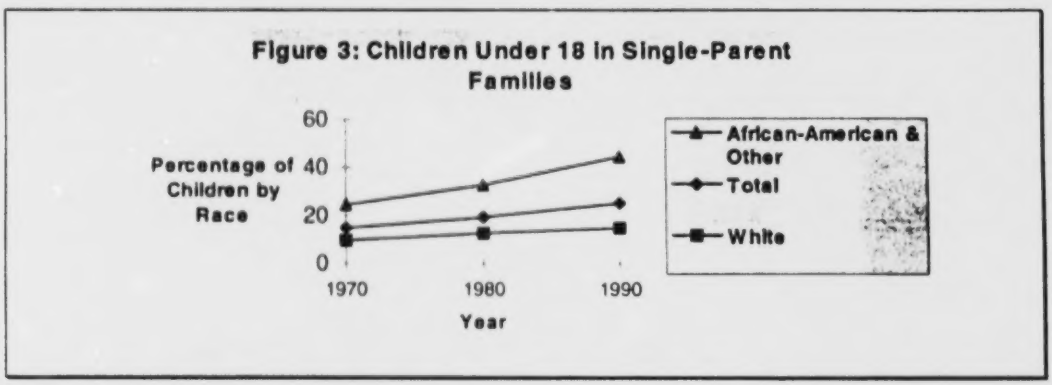
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 15,767 babies, 30.4% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 23.6% and in 1960 it was 12.3%. In 1994, 13.2% of White children and 57.8% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 3,367 babies, 6.5% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 19,134, constituting 36.9% of all babies, 18.7% of White babies, and 65.8% of African-American and Others.



Divorce Rate: In 1994, 51,564 marriage licenses were issued, while 15,802 divorce decrees involving 13,129 children were filed. In 1970 only 6,741 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 200,590 children lived with only one parent. This was 25.1% of all children, up from 18.9% in 1980 and 14.5% in 1970. In 1990, 14.5% of White children and 44.6% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 66.7% of mothers with children under 6 and 78.0% with children 6 - 17 were in the labor force. This has increased substantially from 36.8% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 37,947 children investigated as alleged child abuse and neglect victims: 31.6% for physical abuse, 11.0% for sexual abuse, 67.7% for neglect, and 35.1% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 9,436 children were victims of abuse and neglect: of these 47.3% were male and 52.7% were female; 46.9% were White, and 53.1% were African-American and Other. By age, 41.6% were 0 - 5, 38.1% were 6 - 12, and 20.3% were 13 - 17. They constituted 1.0% of all children age 18 or younger; 0.7% of all Whites and 1.3% of all African-Americans and Others. In the verified cases, 27.2% of abused and neglected children lived in two parent families, 46.0% in single parent families, 7.6% with extended families, and 19.1% in other circumstances.

Family Violence: In 1994, 29,541 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 31.0% of all assaults, which include both simple and aggravated assaults. Overall, 59.4% of all domestic assaults involve spouse abuse (constituting 18.2% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 5.1% of all children did not live with their natural parents; of these, 31,302 or 3.4% of children lived with relatives, 12,231 or 1.3% lived with non-relatives, and 3,615 were in institutional facilities.

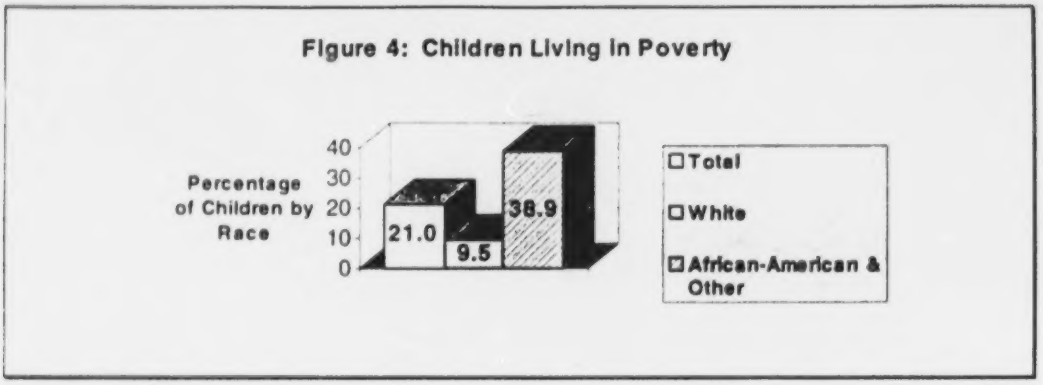
Out of Home Placements: As of September 30, 1996, 4,761 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 14.5% 0-2, 14.9% 3-5, 23.8% 6-10, 15.2% 11-13, and 31.6% 14 and above. The foster care population is comprised of 49.8% males and 50.2% females. Regarding their future, 24.3% were under a plan for placement in adoptive homes, 45.5% for return to a parent or guardian, 4.9% for placement with a relative, 11.7% for independent living, 12.7% for permanent foster care, and 0.6% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.77 adults for every person below age 18. This was up substantially from 1960, when there were only 1.4 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 190,873 children and youth under the age of 18 lived in families with incomes below poverty. Over 21.0% of all children and youth lived below poverty: 9.5% of Whites and 38.9% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 21.0% in 1989, it was 21.2% in 1979 and 28.7% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 22.6% of children 0 - 5 and 20.2% of children 6 - 17 lived in poverty; 20.5% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 50.0% of children in single-parent families lived in poverty, but only 9.3% of children in married-couple families were poor. Children in single-parent families made up 67.0% of all the state's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 247,685 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 56,812 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	909,732	190,873	247,685	304,082	365,384	388,474	421,310
Percent		21.0%	27.2%	33.4%	40.2%	42.7%	46.3%
White	554,000	52,430	77,388	104,488	138,155	151,235	171,548
Percent		9.5%	14.0%	18.9%	24.9%	27.3%	31.0%
African-American and Other	355,732	138,443	170,297	199,594	227,229	237,239	249,762
Percent		38.9%	47.9%	56.1%	63.9%	66.7%	70.2%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the state in 1990, 10.9% of households did not have a car; 5.7% of Whites and 25.1% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 9.1% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 19.0% of households had no phone.

Income: The mean income of families with children in 1989 was $35,561; in 1979, it had been $33,061, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, state real dollar per capita income (eliminating inflation) changed by 6.7%.

The mean income of single-parent families with children was $15,548 in 1989, as compared with $41,991 in married-couple families with children.

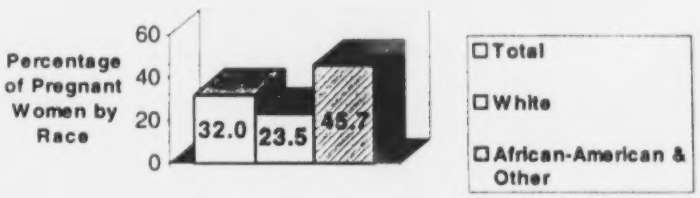
Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 49,678 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 36.9% had child support court orders. The average monthly payment of child support was $148.91, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 22,538 parents in non-AFDC families were obligated to pay a monthly average of $189.92. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 12,292 or 23.7% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 16,632 or 32.0% of pregnant women received less than adequate prenatal care: 7,497 or 23.5% of Whites and 9,135 or 45.7% of African-Americans and Others. In that same year, 825 women received no prenatal care at all.

Figure 5: Less than Adequate Prenatal Care



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 4,760 or 9.2% of all babies in the state were born with low birthweight. Over 13.1% of African-American babies and 6.7% of White babies were born with low birthweight. During 1992-94, approximately 2,885 or 1.8% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 34.6%. For Whites, the rate decreased by 40.4%, while for African-Americans and Others, the rate decreased by 29.0%. Over the three-year period 1992-94, 672 White and 946 African-American and Other infants died before age one. By comparison, 1,051 White and 1,287 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 386 White and 421 African-American and Other children ages 1-14 died in the state. During 1982-84, 479 White and 390 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 52.1% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the state to 18.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the state. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 38,110 to 57,165 youth ages 13-19 in the state were infected with a STD. In the state, there were 224 reported cases of children under age 15 and 2995 youth ages 15 - 19 infected with gonorrhea; 43 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 13.8% first smoked by age 11, 30.8% by age 13, and 42.7% by age 15. In a typical month, 14.7% of 7th and 8th graders and 23.1% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 29.2% of White 7th to 12th graders used cigarettes, in comparison with 6.6% African-Americans. A smaller but significant group of high school students (8.2%) used smokeless tobacco monthly; it was used primarily by White males (23.1%) compared with 2.3% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 97,300 children and youth under age 18 in the state are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 32,524 students in grades 1-12 with learning disabilities and 18,328 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 64,280 children and youth in the state with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% or 144,004 children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the state, this would suggest the need for 846 nurses; 361 are currently available.

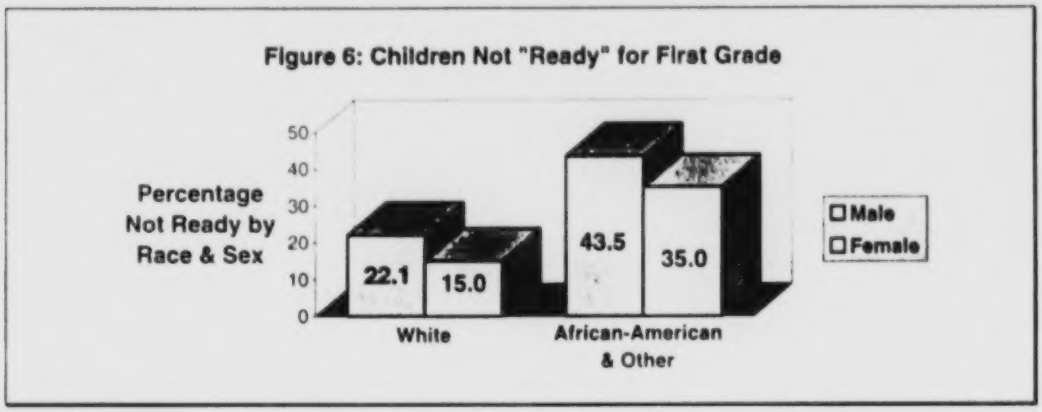
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the state under the age of 18, the share was 30.0% for Whites and 36.3% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

15,394 children not ready	28.1% children not ready

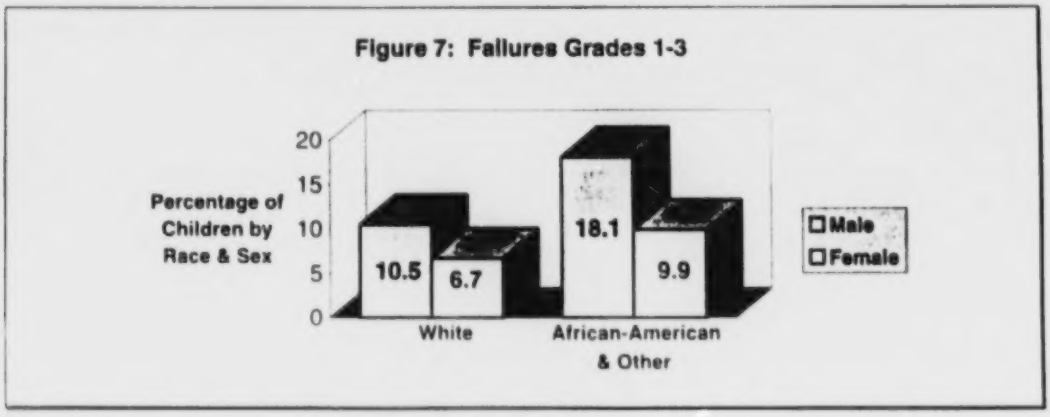


1st Grade Failures in 1995:

3,689 children failing	6.8% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

6,000 children failing	11.3% children failing



Overage for Grade 3 in 1996:

7,539 children overage	16.2% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 15,299 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 15.3% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 28.1% assessed not ready for the 1st grade, 16.2% overage in grade 3, and 15.3% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

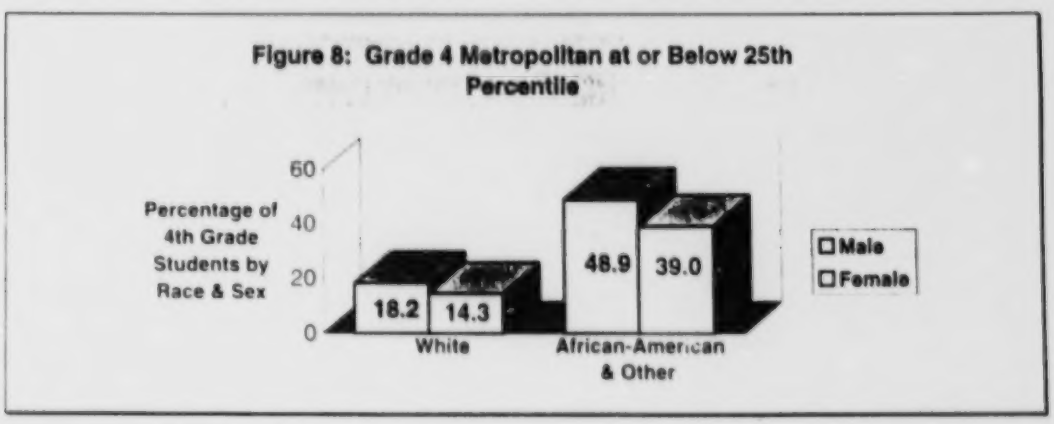
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 18,328 speech and language impaired, 32,524 learning disabled, 4,971 emotionally disabled, 15,923 mentally impaired, and 3,602 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 13.0% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996
(i.e. below 75% of students nationwide)

12,933 children at or below 25th percentile	27.9% children at or below 25th percentile



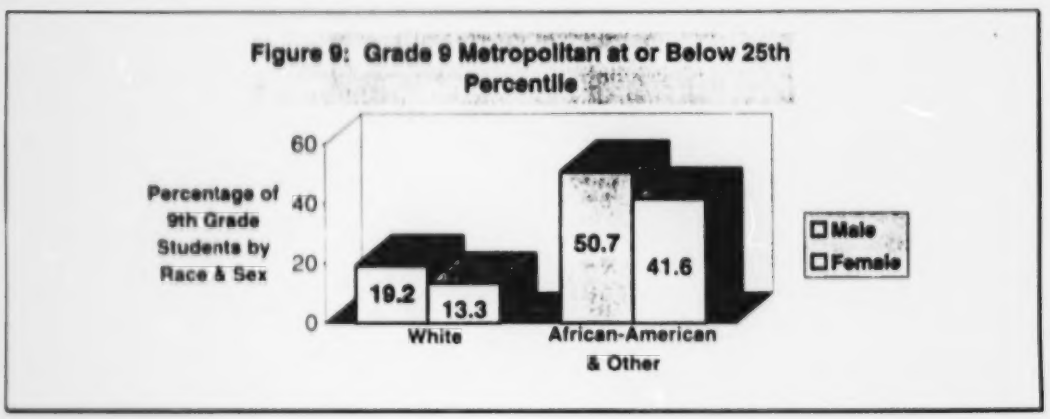
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	16,720	34.8	13,782	28.8
White Males	2,999	21.6	2,973	21.4
White Females	3,211	23.4	2,091	15.2
African-American & Other Males	5,153	52.4	4,745	48.4
African-American & Other Females	5,298	50.9	3,917	37.6

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

14,410 students at or below 25th percentile

29.5% students at or below 25th percentile

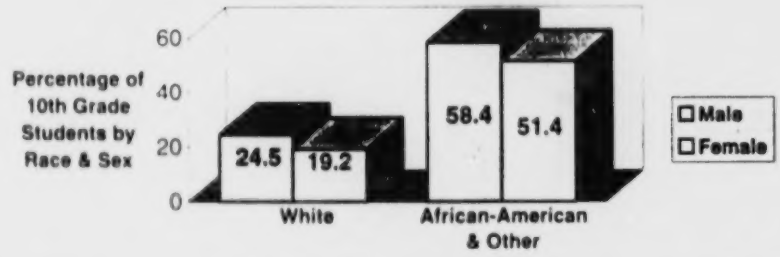


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

14,256 students not passing all parts

35.3% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam

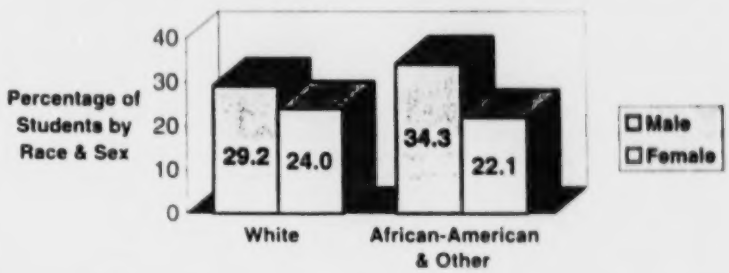


Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the state who did not meet standards declined from 57.4% to 27.5% in math and from 49.1% to 23.0% in reading. During the 1990s the trend altered, with 34.8% not meeting 8th grade math standards in 1996 and 28.8% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of state 4th grade students at or below the 25th percentile of national norms was 28.2% in 1983 on the CTBS, 31.4% in 1990 on the Stanford, and 30.6% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 31.7% in 1990 and 29.5% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

52,368 students drop out — **27.3% students drop out**

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 31.6% of 8th graders failed to graduate from state schools five years later during the period 1980-84, 30.1% during 1985-89, and 30.4% during 1990-94. During the 1995-96 period, 94.5% of all who did graduate received the State High School Diploma, while 2.6% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 2.9% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 2,624 Adult Education high school diplomas were awarded to school completers in the state. During 1995, 4,591 GEDs were awarded in the state. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 19.1% of state resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 27.3% to 35.3%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 21,746 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 9.6% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

6.3%	White Males	11.7%	African-American & Other Males
9.8%	White Females	13.0%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the state, 4,738 girls between the ages of 14 and 17 became pregnant in 1993 and 5,079 in 1994. In 1994, this represented 4.8% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 3.3% for Whites and 7.0% for African-Americans and others. Of all pregnancies to 14-17 year olds, 73.1% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide.

Alcohol Use: In 1992-93, 20.8% of 7th and 8th graders and 37.4% of high schoolers said they had used alcohol in the past month. Of White males, 36.1% had used it in the past month, compared with 30.0% of African-American males; likewise, 32.7% of White females said they had used alcohol, compared with 21.2% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 16.2% had used alcohol by age 11 or younger, 36.1% by age 13, and 58.3% by age 15.

During the previous year, 33.1% of 7th and 8th graders and 42.5% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 28.8% said they had driven after drinking, and 10.0% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 58.2% of eighth graders and 87.2% of seniors felt that beer was easy to get; 50.9% of eighth graders and 48.5% of seniors felt there was not a great risk in using it regularly.

No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

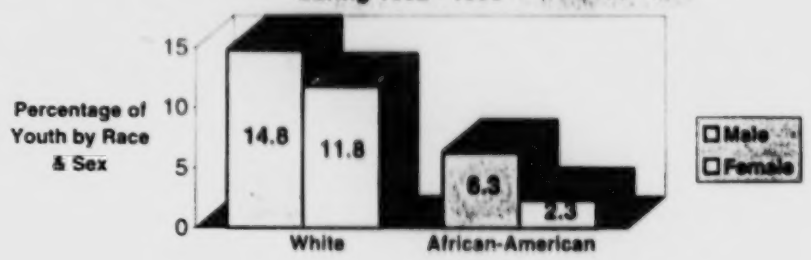
Heavy Drinking: When asked how many drinks, if any, they usually consume, 28.1% of all high school students in 1992-93 responded 3 or more drinks at a time; 16.3% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 5.6% of 7th and 8th graders and 12.8% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (14.8%) and White females (11.8%); use among African-American males was 6.3%; African-American females, 2.3%. Some young people first used drugs at an early age: among students 15 and older, 3.0% experienced their first use by age 11 or sooner; 8.6% had used a drug by age 13, and 17.3% by age 15.

Of seniors who had initiated use of marijuana, 9.7% had started use at home, 44.1% at a friend's home, and 46.2% elsewhere. During the past year, 4.0% of all high school students said that they used marijuana at home, 9.2% at a friend's house, and 6.3% in a car. In the past year, 6.6% of all high school students who drive and 10.5% of seniors who drive said that they had driven after using drugs . Furthermore, 7.7% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 28.3% of 8th graders who had an opinion said it is easy to get marijuana and 20.9% said it is easy to get cocaine or crack; 75.2% of seniors who had an opinion said it is easy to get marijuana and 59.8% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995.

Figure 12: Drug Use Among Students in Grades 7-12 during 1992 - 1993



Juvenile Delinquency: In 1994-95, 19,167 individual juvenile offenders in the state were referred to the Solicitor; of these, 13.3% were age 12 or younger, 31.3% were 13 or 14, and 55.3% were 15 or older.

Of the referrals to the family court, 13.7% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 3,979 juvenile cases constituting 15.2% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

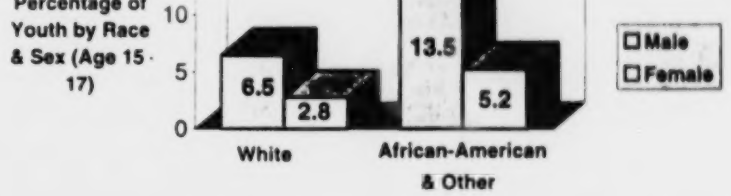
Delinquents are likely to live in families with low income: 38.9% lived in families with income under $10,000, 31.9% with $10,000-$19,999 and 29.2% with $20,000 or more. Furthermore, only 22.6% of delinquents lived with both natural parents, while 50.5% lived in a single parent household and 26.9% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 36.9% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 33.2% had at least one prior referral and 13.5% had been referred to court 3 times or more.

In 1994-95, there were 1,071 juvenile commitments to State institutions.

During 1994-95, 10,563 youth ages 15 to 17 were referred to the family courts. In the state, 6.4% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.

Figure 13: Court Referrals



Deaths: During 1990-94, 1,255 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 527 deaths between 1990 and 1994; homicides killed 208 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the state. The 25.1% of children in single-parent families, 21.0% in poverty, 27.3% dropping out of school, 37.4% of high school students using alcohol and 20.7% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

Dr. A. Baron Holmes (803-734-2291) E-mail bholmes@ogc.state.sc.us

-or-

SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

SOUTH CAROLINA TRENDS

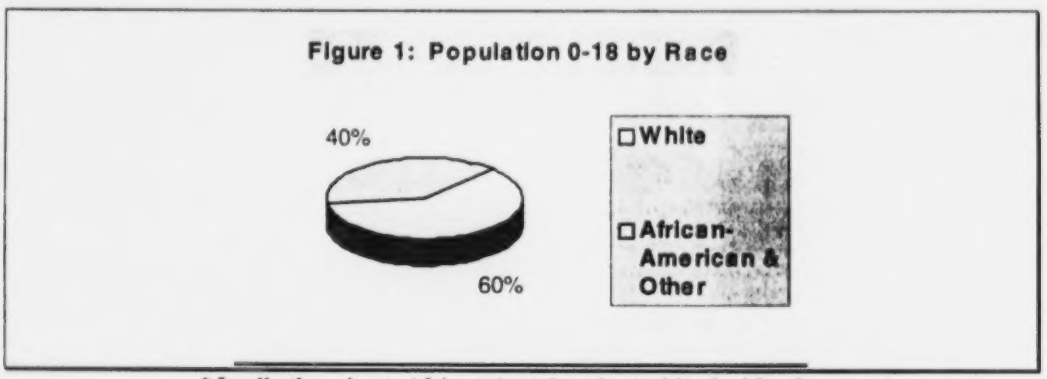
Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	3,691	6.6		1992	3,527	6.6		1993	3,768	7.3		1994
Births to Mothers Not Completing High School	13,229	23.6		1992	12,049	22.4		1993	11,304	21.8		1994
Births to Single Mothers	17,026	30.3		1992	16,299	30.3		1993	15,767	30.4		1994
Children in Single-Parent Families		14.5		1970		18.9		1980	200,590	25.1		1990
Economic Status												
Poor Children		28.7		1969		21.2		1979	190,873	21.0		1989
Mean Income of Families with Children					33,061	N/A		1979	35,561	N/A		1989
Health												
Less than Adequate Prenatal Care	22,144	39.5		1992	18,969	35.3		1993	16,632	32.0		1994
Low Birth Weight	5,071	9.0		1992	5,020	9.3		1993	4,760	9.2		1994
Readiness and Early School Performance												
1st Grade "Not Ready"	14,752	26.6		1990-91	14,766	27.8		1992-93	15,394	28.1		1994-95
1st Grade Failures	4,854	9.0		1991-92	4,590	9.7		1992-93	3,689	6.8		1994-95
Failures Grades 1-3 (approx. %)	7,387	14.1		1991-92	6,580	14.3		1992-93	6,000	11.3		1994-95
Overage for Grade 3	12,604	26.0		1991-92	9,803	20.5		1993-94	7,539	16.2		1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	9,264	19.3		1991-92	9,118	19.8		1993-94	12,933	27.9		1995-96*
Grade 8 BSAP - Math (Below Standards)	12,197	27.0		1991-92	14,587	30.9		1993-94	16,720	34.8		1995-96
Grade 8 BSAP - Reading (Below Standards)	11,005	24.4		1991-92	13,594	28.8		1993-94	13,782	28.8		1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	10,371	21.9		1991-92	11,853	24.3		1993-94	14,410	29.5		1995-96*
Exit Exam (Not passing all parts on 1st attempt)	11,662	31.1		1991-92	12,680	32.7		1993-94	14,256	35.3		1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	4,939	4.7		1992	4,738	4.5		1993	5,079	4.8		1994
Alcohol Use (High School)	57,051	40.2		1989-90					53,334	37.4		1992-93
Drug Use (High School)	18,931	13.4		1989-90					18,253	12.8		1992-93
Binge Drinking (5 or more drinks)		15.6		1989-90					23,245	16.3		1992-93

1996 Report ABBEVILLE

DEMOGRAPHICS

In 1994, there were 6,310 children under age 18 in the county. Of these, 3,810 were White and 2,500 were African-American and Other races. There were 6,588 children under age 18 in 1980, 7,150 in 1970, and 8,359 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 26.1% of the population in 1994, down from 39.0% in 1960, 33.9% in 1970 and 29.1% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 34.3% of all households in 1990, as compared with 42.0% of households in 1960, had children below the age of 18.

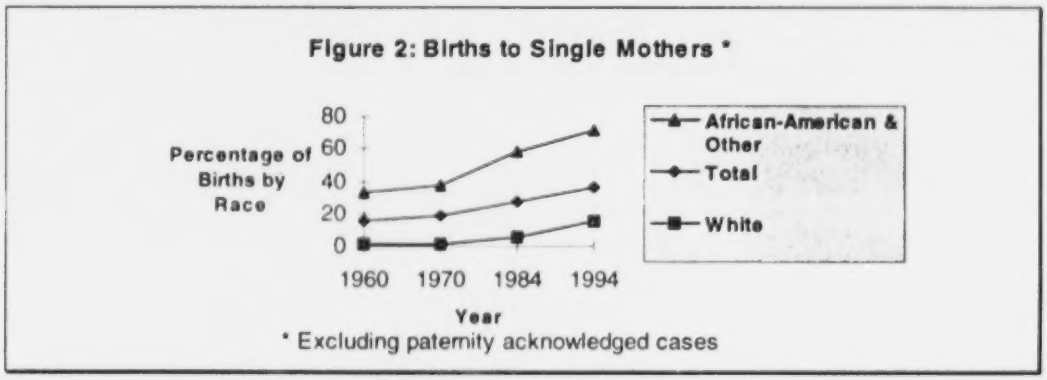
Births to Teen Mothers: In 1994, 26 babies were born to mothers younger than age 18. These babies were 8.9% of all children born in the county; 7.1% of all White babies and 11.8% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 76.9% were born to single mothers.

In 1994, 55 babies were born to mothers younger than age 20. These babies were 18.8% of all children born in the county; 16.5% of all White babies and 22.7% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 65.5% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 83 babies, 28.4% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 44.1% in 1970.

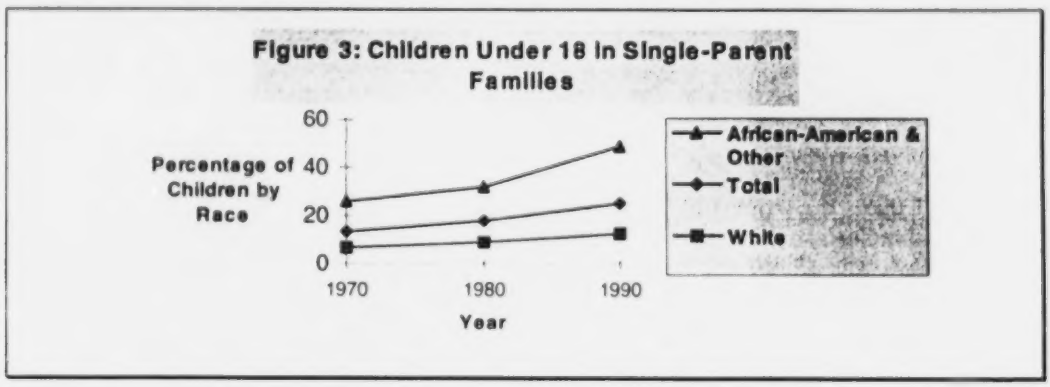
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 106 babies, 36.3% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 27.3% and in 1960 it was 15.7%. In 1994, 15.4% of White children and 70.9% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 4 babies, 1.4% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 110, constituting 37.7% of all babies, 16.5% of White babies, and 72.7% of African-American and Others.



Divorce Rate: In 1994, 265 marriage licenses were issued, while 102 divorce decrees involving 89 children were filed. In 1970 only 36 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 1,347 children lived with only one parent. This was 25.3% of all children, up from 18.1% in 1980 and 13.4% in 1970. In 1990, 12.5% of White children and 49.1% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 71.0% of mothers with children under 6 and 81.5% with children 6 - 17 were in the labor force. This has increased substantially from 46.0% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 72 children investigated as alleged child abuse and neglect victims: 30.6% for physical abuse, 18.1% for sexual abuse, 52.8% for neglect, and 19.4% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 28 children were victims of abuse and neglect: of these 35.7% were male and 64.3% were female; 53.6% were White, and 46.4% were African-American and Other. By age, 21.4% were 0 - 5, 60.7% were 6 - 12, and 17.9% were 13 - 17. They constituted 0.4% of all children age 18 or younger; 0.4% of all Whites and 0.5% of all African-Americans and Others. In the verified cases, 10.7% of abused and neglected children lived in two parent families, 57.1% in single parent families, 7.1% with extended families, and 25.0% in other circumstances.

Family Violence: In 1994, 161 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 35.0% of all assaults, which include both simple and aggravated assaults. Overall, 62.1% of all domestic assaults involve spouse abuse (constituting 21.7% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 5.0% of all children did not live with their natural parents; of these, 149 or 2.4% of children lived with relatives, 160 or 2.6% lived with non-relatives, and 0 were in institutional facilities.

Out of Home Placements: As of September 30, 1996, 13 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 0.0% 0-2, 0.0% 3-5, 23.1% 6-10, 30.8% 11-13, and 46.2% 14 and above. The foster care population is comprised of 46.2% males and 53.8% females. Regarding their future, 23.1% were under a plan for placement in adoptive homes, 7.7% for return to a parent or guardian, 30.8% for placement with a relative, 15.4% for independent living, 23.1% for permanent foster care, and 0.0% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.84 adults for every person below age 18. This was up substantially from 1960, when there were only 1.56 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 1,047 children and youth under the age of 18 lived in families with incomes below poverty. Over 17.3% of all children and youth lived below poverty: 7.7% of Whites and 32.3% of African-Americans and others.

Figure 4: Children Living in Poverty

Poverty has always been a serious problem. While the rate among children under age 18 was 17.3% in 1989, it was 17.8% in 1979 and 21.9% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 23.9% of children 0 - 5 and 14.3% of children 6 - 17 lived in poverty; 19.0% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 46.3% of children in single-parent families lived in poverty, but only 6.1% of children in married-couple families were poor. Children in single-parent families made up 70.5% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 1,399 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 352 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	6,050	1,047	1,399	1,843	2,252	2,438	2,751
Percent		17.3%	23.1%	30.5%	37.2%	40.3%	45.5%
White	3,679	282	404	598	858	1,010	1,191
Percent		7.7%	11.0%	16.3%	23.3%	27.5%	32.4%
African-American and Other	2,371	765	995	1,245	1,394	1,428	1,560
Percent		32.3%	42.0%	52.5%	58.8%	60.2%	65.8%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 12.3% of households did not have a car; 6.2% of Whites and 27.2% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 9.8% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 29.1% of households had no phone.

Income: The mean income of families with children in 1989 was $32,264; in 1979, it had been $31,386, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 5.9%.

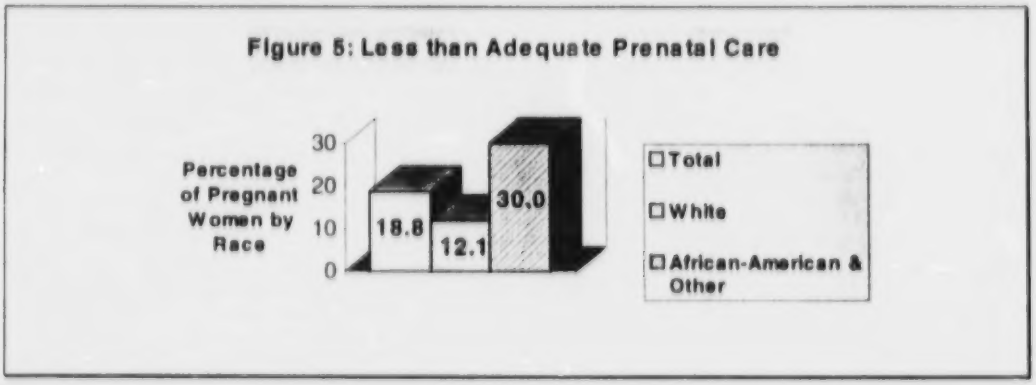
The mean income of single-parent families with children was $14,391 in 1989, as compared with $37,543 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 338 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 44.1% had child support court orders. The average monthly payment of child support was $159.82, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 94 parents in non-AFDC families were obligated to pay a monthly average of $201.99. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 42 or 14.4% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 55 or 18.8% of pregnant women received less than adequate prenatal care: 22 or 12.1% of Whites and 33 or 30.0% of African-Americans and Others. In that same year, 4 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 30 or 10.3% of all babies in the county were born with low birthweight. Over 18.2% of African-American babies and 5.5% of White babies were born with low birthweight. During 1992-94, approximately 17 or 1.9% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate increased by 17.8%. For Whites, the rate increased by 8.5%, while for African-Americans and Others, the rate increased by 28.8%. Over the three-year period 1992-94, 6 White and 6 African-American and Other infants died before age one. By comparison, 6 White and 5 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 2 White and 4 African-American and Other children ages 1-14 died in the county. During 1982-84, 0 White and 9 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 36.8% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 15.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 258 to 387 youth ages 13-19 in the county were infected with a STD. In the county, there was 1 reported case of children under age 15 and 8 youth ages 15 - 19 infected with gonorrhea; 1 youth ages 15 - 19 was reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 14.3% first smoked by age 11, 31.0% by age 13, and 43.8% by age 15. In a typical month, 16.9% of 7th and 8th graders and 23.4% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 30.7% of White 7th to 12th graders used cigarettes, in comparison with 6.2% African-Americans. A smaller but significant group of high school students (11.5%) used smokeless tobacco monthly; it was used primarily by White males (34.7%) compared with 2.4% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 631 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 220 students in grades 1-12 with learning disabilities and 90 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 423 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 934 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 5 nurses; 2 are currently available.

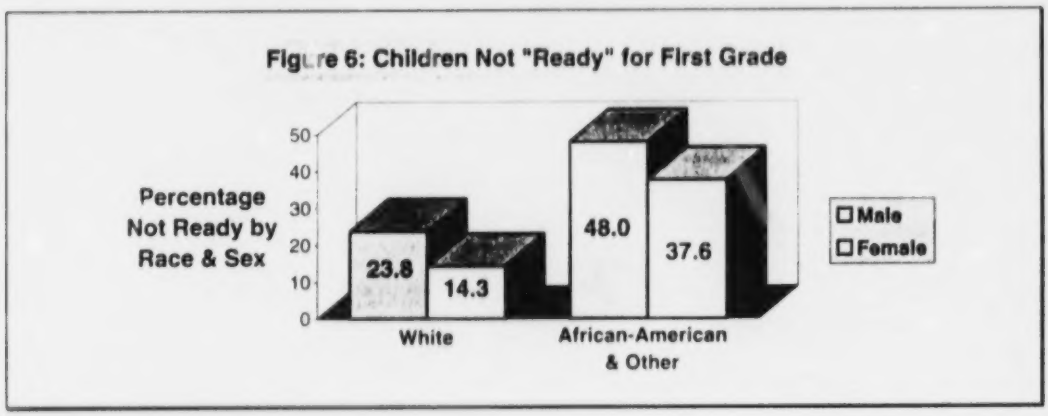
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 24.8% for Whites and 32.0% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

117 children not ready	**31.2% children not ready**

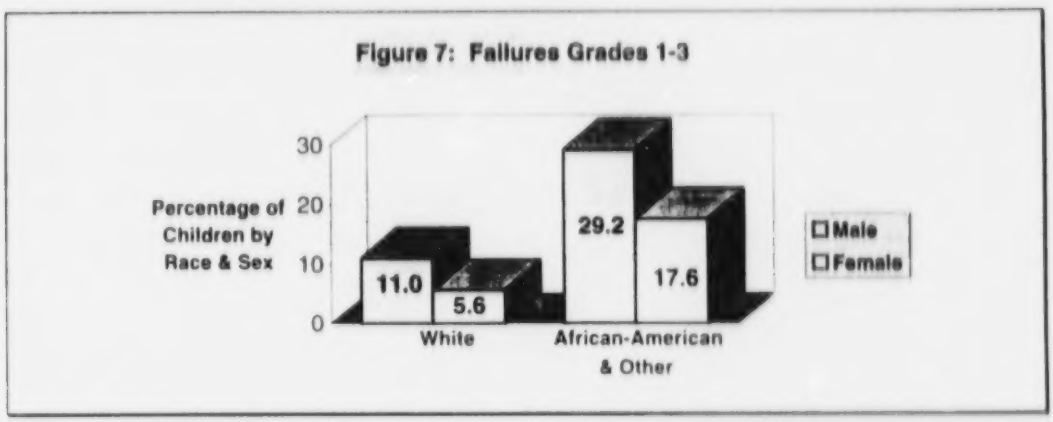


1st Grade Failures in 1995:

42 children failing	**12.9% children failing**

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

49 children failing	**15.2% children failing**



Overage for Grade 3 in 1996:

74 children overage	24.6% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 98 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 16.6% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 31.2% assessed not ready for the 1st grade, 24.6% overage in grade 3, and 16.6% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

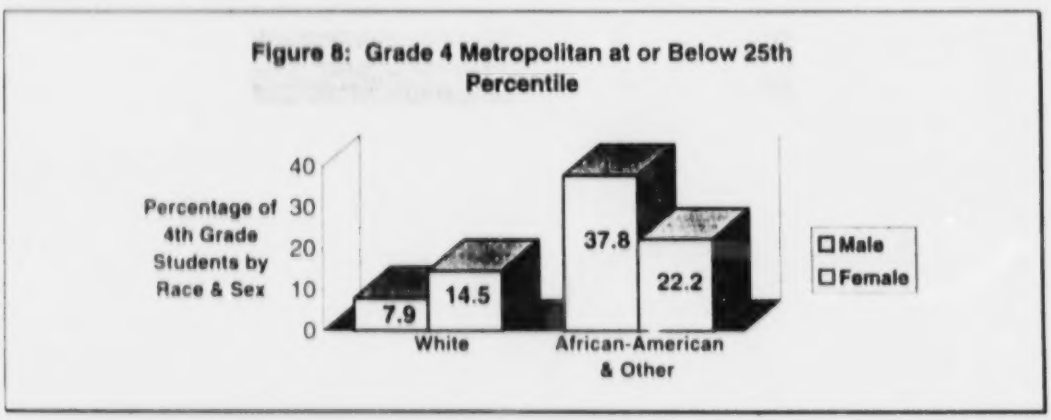
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 90 speech and language impaired, 220 learning disabled, 12 emotionally disabled, 162 mentally impaired, and 5 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 14.3% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996
(i.e. below 75% of students nationwide)

48 children at or below 25th percentile	18.5% children at or below 25th percentile



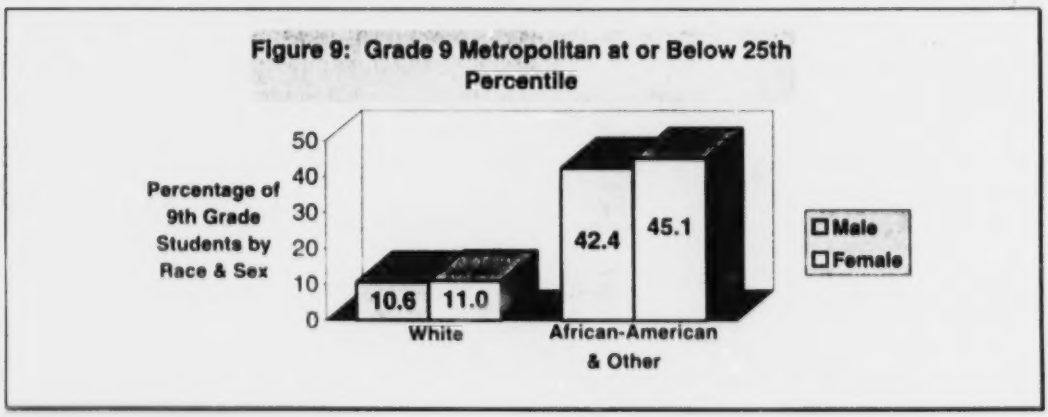
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	113	39.8	64	22.5
White Males	22	27.5	13	16.3
White Females	25	28.7	4	4.6
African-American & Other Males	32	52.5	25	41.0
African-American & Other Females	34	60.7	22	39.3

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

68 students at or below 25th percentile

24.7% students at or below 25th percentile

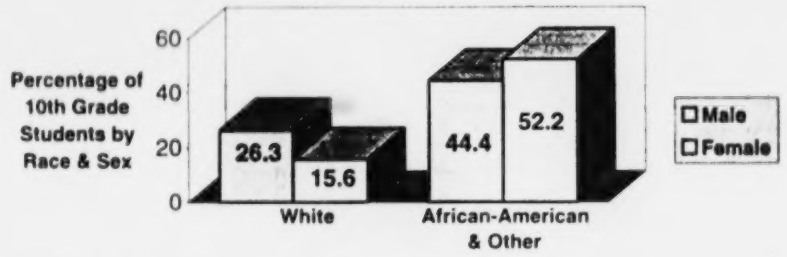


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

76 students not passing all parts

31.8% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



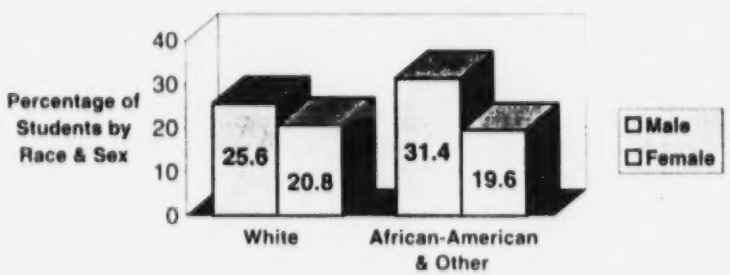
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 64.1% to 36.9% in math and from 50.4% to 19.5% in reading. During the 1990s the trend altered, with 39.8% not meeting 8th grade math standards in 1996 and 22.5% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 18.2% in 1983 on the CTBS, 22.1% in 1990 on the Stanford, and 23.5% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 34.1% in 1990 and 23.9% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

289 students drop out

24.4% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 34.9% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 29.0% during 1985-89, and 24.7% during 1990-94. During the 1995-96 period, 93.0% of all who did graduate received the State High School Diploma, while 1.7% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 5.2% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 3 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 31 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 24.5% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 18.5% to 39.8%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 160 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 9.7% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

7.2%	White Males	15.0%	African-American & Other Males
7.9%	White Females	12.0%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 34 girls between the ages of 14 and 17 became pregnant in 1993 and 36 in 1994. In 1994, this represented 5.0% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 3.0% for Whites and 7.9% for African-Americans and others. Of all pregnancies to 14-17 year olds, 72.2% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it increased by 5.5%.

Alcohol Use: In 1992-93, 29.9% of 7th and 8th graders and 41.1% of high schoolers said they had used alcohol in the past month. Of White males, 42.8% had used it in the past month, compared with 40.8% of African-American males; likewise, 33.2% of White females said they had used alcohol, compared with 29.8% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 16.5% had used alcohol by age 11 or younger, 36.6% by age 13, and 64.3% by age 15.

During the previous year, 44.7% of 7th and 8th graders and 52.9% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 34.0% said they had driven after drinking, and 12.5% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 66.5% of eighth graders and 90.0% of seniors felt that beer was easy to get; 51.3% of eighth graders and 44.8% of seniors felt there was not a great risk in using it regularly.

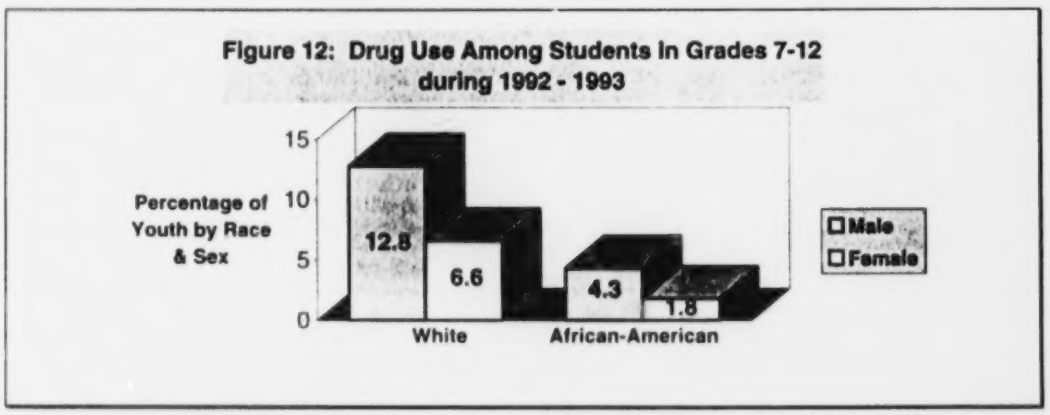
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 31.3% of all high school students in 1992-93 responded 3 or more drinks at a time; 19.7% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 4.8% of 7th and 8th graders and 8.3% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (12.8%) and White females (6.6%); use among African-American males was 4.3%; African-American females, 1.8%. Some young people first used drugs at an early age: among students 15 and older, 1.4% experienced their first use by age 11 or sooner; 6.7% had used a drug by age 13, and 13.7% by age 15.

Of seniors who had initiated use of marijuana, 3.1% had started use at home, 42.6% at a friend's home, and 54.3% elsewhere. During the past year, 1.8% of all high school students said that they used marijuana at home, 5.3% at a friend's house, and 4.1% in a car. In the past year, 4.7% of all high school students who drive and 5.4% of seniors who drive said that they had driven after using drugs . Furthermore, 6.2% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 30.6% of 8th graders who had an opinion said it is easy to get marijuana and 21.7% said it is easy to get cocaine or crack; 69.0% of seniors who had an opinion said it is easy to get marijuana and 57.8% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 13.4% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 123 individual juvenile offenders in the county were referred to the Solicitor; of these, 13.0% were age 12 or younger, 26.0% were 13 or 14, and 61.0% were 15 or older.

Of the referrals to the family court, 6.8% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 33 juvenile cases constituting 22.4% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

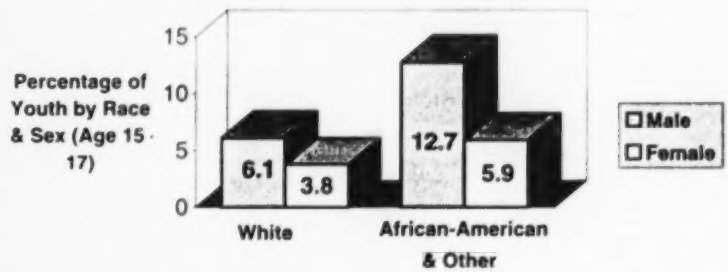
Delinquents are likely to live in families with low income: 11.9% lived in families with income under $10,000, 51.7% with $10,000-$19,999 and 36.4% with $20,000 or more. Furthermore, only 25.4% of delinquents lived with both natural parents, while 43.2% lived in a single parent household and 31.4% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 33.1% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 30.1% had at least one prior referral and 10.6% had been referred to court 3 times or more.

In 1994-95, there were 7 juvenile commitments from the county to State institutions.

During 1994-95, 75 youth ages 15 to 17 were referred to the family courts. In the county, 6.7% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.

Figure 13: Court Referrals



Deaths: During 1990-94, 10 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 4 deaths between 1990 and 1994; homicides killed 1 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 25.3% of children in single-parent families, 17.3% in poverty, 24.4% dropping out of school, 41.1% of high school students using alcohol and 13.4% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
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Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

ABBEVILLE

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	26	8.9	7.3	1.22	22	1994
Births to Mothers Not Completing High School	83	28.4	21.8	1.30	36	1994
Births to Single Mothers	106	36.3	30.4	1.19	22	1994
Children in Single-Parent Families	1,347	25.3	25.1	1.01	18	1990
Parents Working	2,094	78.6	74.3	1.06	40	1990
Abuse & Neglect Victims	28	0.4	1.0	0.40	3	1995-96
Separation from Parents	309	5.0	5.1	0.98	16	1990
Economic Status						
Poor Children	1,047	17.3	21.0	0.82	11	1989
Mean Income of Families with Children	$32,264	NA	NA	0.91	23	1989
Health						
Less than Adequate Prenatal Care	55	18.8	32.0	0.59	1	1994
Low Birth Weight	30	10.3	9.2	1.12	29	1994
Not Adequately Immunized	71	15.0	18.0	0.83	27	1995
Cigarette Smokers (High School)	209	23.4	23.1	1.01	29	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	117	31.2	28.1	1.11	31	1994-95
1st Grade Failures	42	12.9	6.8	1.90	38	1994-95
Failures grades 1-3 (approx. %)	49	15.2	11.3	1.35	31	1994-95
Overage for Grade 3	74	24.6	16.2	1.52	42	1995-96
Special Education (ages 8 and 9)	98	16.6	15.3	1.08	30	1995-96
School Achievement						
Special Education Grades 1 - 12	489	14.3	13.0	1.10	31	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	48	18.5	27.9	0.66	2	1995-96
Grade 8 BSAP - Math (Below standards)	113	39.8	34.8	1.14	25	1995-96
Grade 8 BSAP - Reading (Below standards)	64	22.5	28.8	0.78	5	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	68	24.7	29.5	0.84	9	1995-96
Exit Exam (Not passing all parts on 1st attempt)	76	31.8	35.3	0.90	11	1995-96
Dropout Rate	289	24.4	27.3	0.89	14	1992-95
25-34 Year olds with no HS Degree or GED	835	24.5	19.1	1.28	26	1990
Adolescent Risk Behavior						
Not in School or Employed	160	9.7	9.6	1.01	16	1990
Pregnancy (Ages 14 - 17)	36	5.0	4.8	1.04	17	1994
Alcohol Use (High School)	367	41.1	37.4	1.10	41	1992-93
Drug Use (High School)	74	8.3	12.8	0.65	21	1992-93
Binge Drinking (5 or more drinks)	176	19.7	16.3	1.21	43	1992-93
Delinquency (ages 15 - 17)	75	6.7	6.4	1.05	25	1994-95

* 1 = "best" 46 = "worst"

ABBEVILLE TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	
Family													
Births to Teen Mothers	18	5.6	0.85	1992	18	6.1	0.92	1993	26	8.9	1.22	1994	
Births to Mothers Not Completing High School	79	24.4	1.03	1992	84	28.6	1.28	1993	83	28.4	1.30	1994	
Births to Single Mothers	133	41.0	1.35	1992	112	38.1	1.26	1993	106	36.3	1.19	1994	
Children in Single-Parent Families		13.4	0.92	1970		18.1	0.96	1980	1,347	25.3	1.01	1990	
Economic Status													
Poor Children		21.9	0.76	1969		17.8	0.84	1979	1,047	17.3	0.82	1989	
Mean Income of Families with Children					31,386	N/A	1.05	1979	32,264	N/A	1.10	1989	
Health													
Less than Adequate Prenatal Care	81	25.0	0.63	1992	74	25.2	0.71	1993	55	18.8	0.59	1994	
Low Birth Weight	30	9.3	1.03	1992	34	11.6	1.25	1993	30	10.3	1.12	1994	
Readiness and Early School Performance													
1st Grade "Not Ready"	89	26.1	0.98	1990-91	96	27.6	0.99	1992-93	117	31.2	1.11	1994-95	
1st Grade Failures	38	11.3	1.26	1991-92	52	17.1	1.76	1992-93	42	12.9	1.90	1994-95	
Failures Grades 1-3 (approx. %)	49	15.0	1.06	1991-92	61	20.5	1.43	1992-93	49	15.2	1.35	1994-95	
Overage for Grade 3	96	30.6	1.18	1991-92	82	29.9	1.46	1993-94	74	24.6	1.52	1995-96	
School Achievement													
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	25	9.3	0.48	1991-92	38	14.0	0.71	1993-94	48	18.5	0.66	1995-96*	
Grade 8 BSAP - Math (Below Standards)	76	29.2	1.08	1991-92	88	33.3	1.08	1993-94	113	39.8	1.14	1995-96	
Grade 8 BSAP - Reading (Below Standards)	59	22.7	0.93	1991-92	60	22.8	0.79	1993-94	64	22.5	0.78	1995-96	
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	66	21.7	0.99	1991-92	48	15.6	0.64	1993-94	68	24.7	0.84	1995-96*	
Exit Exam (Not passing all parts on 1st attempt)	82	34.9	1.12	1991-92	78	35.3	1.08	1993-94	76	31.8	0.90	1995-96	
Adolescent Risk Behavior													
Pregnancy (Women ages 14 - 17)	27	3.8	0.81	1992	34	4.7	1.04	1993	36	5.0	1.04	1994	*
Alcohol Use (High School)	402	41.5	1.03	1989-90					367	41.1	1.10	1992-93	*
Drug Use (High School)	84	8.7	0.65	1989-90					74	8.3	0.65	1992-93	*
Binge Drinking (5 or more drinks)		18.0	1.15	1989-90					176	19.7	1.21	1992-93	*

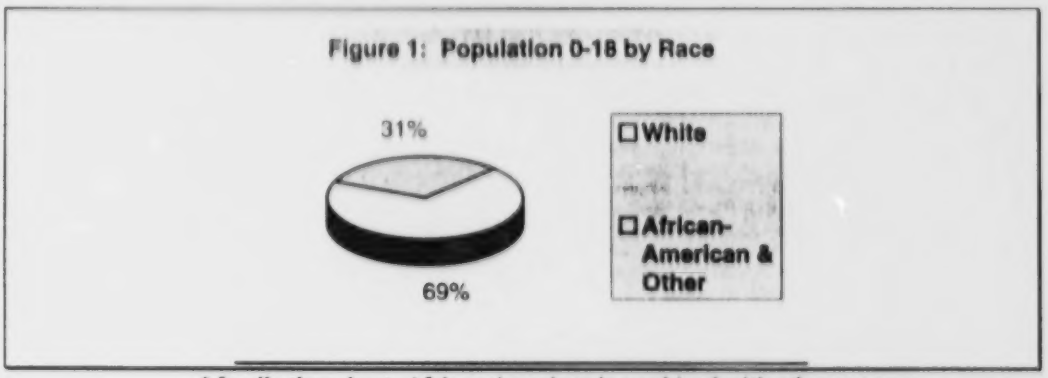
SOUTH CAROLINA kids count

1996 Report AIKEN

DEMOGRAPHICS

In 1994, there were 35,820 children under age 18 in the county. Of these, 24,700 were White and 11,120 were African-American and Other races. There were 32,361 children under age 18 in 1980, 34,790 in 1970, and 34,525 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 27.1% of the population in 1994, down from 42.6% in 1960, 38.2% in 1970 and 30.6% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 36.4% of all households in 1990, as compared with 51.0% of households in 1960, had children below the age of 18.

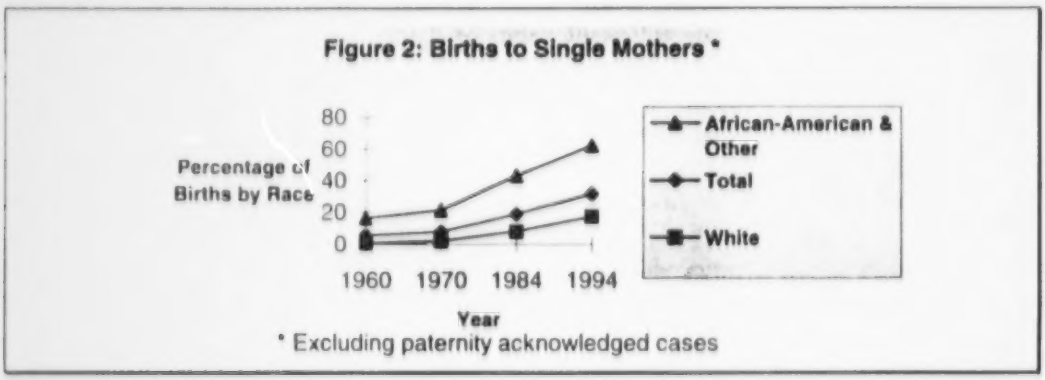
Births to Teen Mothers: In 1994, 133 babies were born to mothers younger than age 18. These babies were 7.0% of all children born in the county; 4.8% of all White babies and 11.8% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 77.4% were born to single mothers.

In 1994, 334 babies were born to mothers younger than age 20. These babies were 17.6% of all children born in the county; 13.3% of all White babies and 27.0% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 69.8% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 409 babies, 21.6% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 46.7% in 1970.

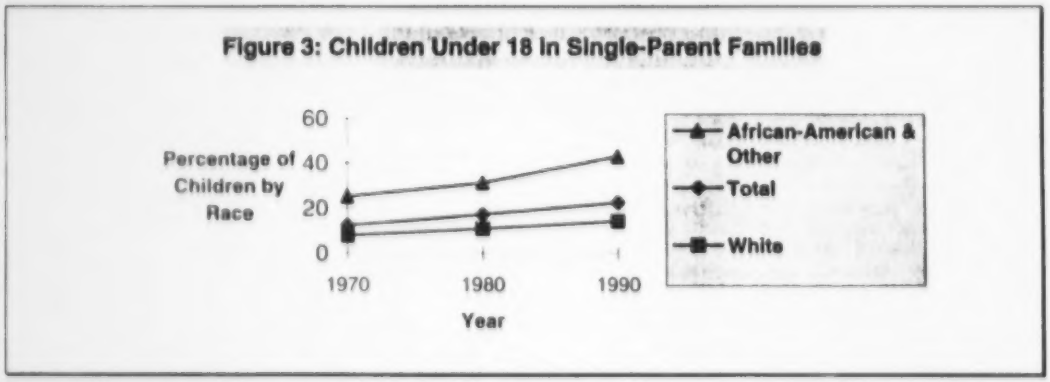
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 596 babies, 31.5% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 18.8% and in 1960 it was 5.4%. In 1994, 17.3% of White children and 61.9% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 33 babies, 1.7% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 629, constituting 33.2% of all babies, 18.9% of White babies, and 64.0% of African-American and Others.



Divorce Rate: In 1994, 2,742 marriage licenses were issued, while 581 divorce decrees involving 494 children were filed. In 1970 only 166 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 6,674 children lived with only one parent. This was 22.5% of all children, up from 17.2% in 1980 and 12.4% in 1970. In 1990, 14.3% of White children and 43.1% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 65.6% of mothers with children under 6 and 74.8% with children 6 - 17 were in the labor force. This has increased substantially from 30.2% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 1,461 children investigated as alleged child abuse and neglect victims: 32.2% for physical abuse, 12.7% for sexual abuse, 73.2% for neglect, and 73.0% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 364 children were victims of abuse and neglect: of these 45.9% were male and 54.1% were female; 43.6% were White, and 56.4% were African-American and Other. By age, 39.0% were 0 - 5, 39.3% were 6 - 12, and 21.7% were 13 - 17. They constituted 1.0% of all children age 18 or younger; 0.6% of all Whites and 1.8% of all African-Americans and Others. In the verified cases, 36.5% of abused and neglected children lived in two parent families, 40.1% in single parent families, 10.4% with extended families, and 12.9% in other circumstances.

Family Violence: In 1994, 1,147 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 36.0% of all assaults, which include both simple and aggravated assaults. Overall, 58.2% of all domestic assaults involve spouse abuse (constituting 20.9% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 4.4% of all children did not live with their natural parents; of these, 998 or 3.0% of children lived with relatives, 432 or 1.3% lived with non-relatives, and 43 were in institutional facilities.

Out of Home Placements: As of September 30, 1996, 183 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 19.7% 0-2, 13.7% 3-5, 21.9% 6-10, 14.8% 11-13, and 30.1% 14 and above. The foster care population is comprised of 51.4% males and 48.6% females. Regarding their future, 37.7% were under a plan for placement in adoptive homes, 29.0% for return to a parent or guardian, 3.8% for placement with a relative, 12.6% for independent living, 16.9% for permanent foster care, and 0.0% for other circumstances.

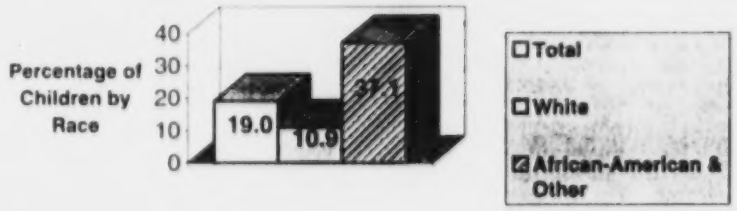
Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.69 adults for every person below age 18. This was up substantially from 1960, when there were only 1.35 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 6,225 children and youth under the age of 18 lived in families with incomes below poverty. Over 19.0% of all children and youth lived below poverty: 10.9% of Whites and 37.1% of African-Americans and others.

Figure 4: Children Living in Poverty



Poverty has always been a serious problem. While the rate among children under age 18 was 19.0% in 1989, it was 16.1% in 1979 and 20.8% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 21.0% of children 0 - 5 and 18.0% of children 6 - 17 lived in poverty; 18.5% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 50.2% of children in single-parent families lived in poverty, but only 9.0% of children in married-couple families were poor. Children in single-parent families made up 62.7% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 7,290 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 1,065 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	32,803	6,225	7,290	9,067	11,032	11,501	12,346
Percent		19.0%	22.2%	27.6%	33.6%	35.1%	37.6%
White	22,690	2,475	2,933	3,981	5,048	5,311	5,871
Percent		10.9%	12.9%	17.5%	22.2%	23.4%	25.9%
African-American and Other	10,113	3,750	4,357	5,086	5,984	6,190	6,475
Percent		37.1%	43.1%	50.3%	59.2%	61.2%	64.0%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 7.9% of households did not have a car; 5.0% of Whites and 18.5% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 8.5% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 18.9% of households had no phone.

Income: The mean income of families with children in 1989 was $39,351; in 1979, it had been $34,566, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 1.2%.

The mean income of single-parent families with children was $16,243 in 1989, as compared with $45,576 in married-couple families with children.

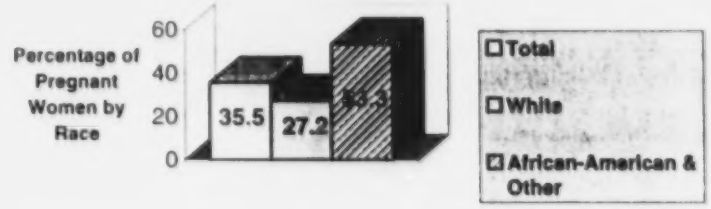
Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 1,555 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 35.3% had child support court orders. The average monthly payment of child support was $168.56, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 1,091 parents in non-AFDC families were obligated to pay a monthly average of $203.59. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 357 or 18.8% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 673 or 35.5% of pregnant women received less than adequate prenatal care: 350 or 27.2% of Whites and 323 or 53.3% of African-Americans and Others. In that same year, 18 women received no prenatal care at all.

Figure 5: Less than Adequate Prenatal Care



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 156 or 8.2% of all babies in the county were born with low birthweight. Over 11.9% of African-American babies and 6.5% of White babies were born with low birthweight. During 1992-94, approximately 82 or 1.4% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 22.6%. For Whites, the rate decreased by 15.8%, while for African-Americans and Others, the rate decreased by 27.3%. Over the three-year period 1992-94, 28 White and 25 African-American and Other infants died before age one. By comparison, 29 White and 32 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 19 White and 9 African-American and Other children ages 1-14 died in the county. During 1982-84, 12 White and 20 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 43.4% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 10.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 1,321 to 1,982 youth ages 13-19 in the county were infected with a STD. In the county, there were 3 reported cases of children under age 15 and 38 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 13.3% first smoked by age 11, 28.8% by age 13, and 41.6% by age 15. In a typical month, 14.2% of 7th and 8th graders and 23.6% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 26.9% of White 7th to 12th graders used cigarettes, in comparison with 5.6% African-Americans. A smaller but significant group of high school students (10.2%) used smokeless tobacco monthly; it was used primarily by White males (26.0%) compared with 1.9% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 3,582 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 862 students in grades 1-12 with learning disabilities and 618 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 2,366 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 5,301 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 32 nurses; 7 are currently available.

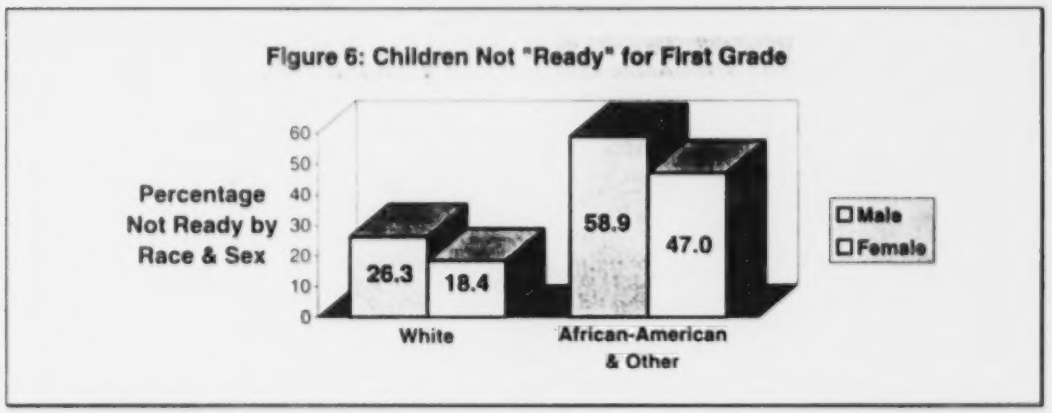
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 18.2% for Whites and 26.2% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

683 children not ready	33.6% children not ready

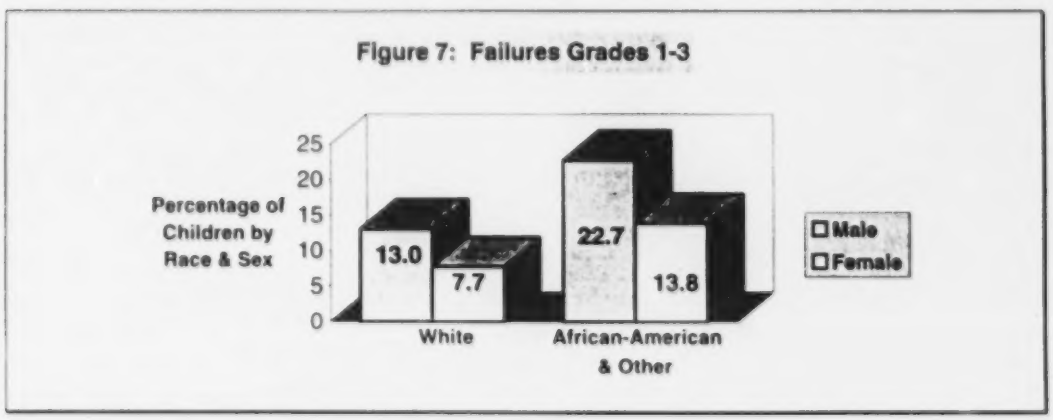


1st Grade Failures in 1995:

191 children failing	9.2% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

272 children failing	13.3% children failing



Overage for Grade 3 in 1996:

282 children overage	15.6% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 505 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 13.5% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 33.6% assessed not ready for the 1st grade, 15.6% overage in grade 3, and 13.5% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

SCHOOL ACHIEVEMENT

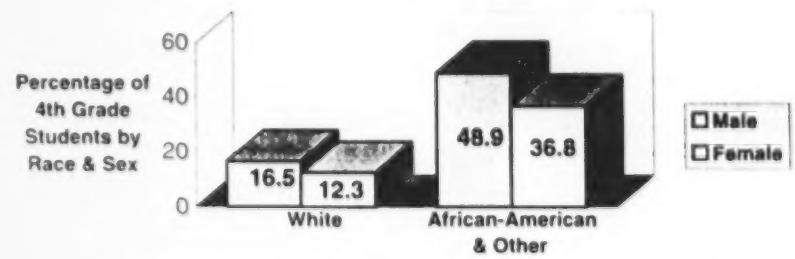
By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 618 speech and language impaired, 862 learning disabled, 104 emotionally disabled, 572 mentally impaired, and 258 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 10.8% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

437 children at or below 25th percentile	24.0% children at or below 25th percentile

Figure 8: Grade 4 Metropolitan at or Below 25th Percentile



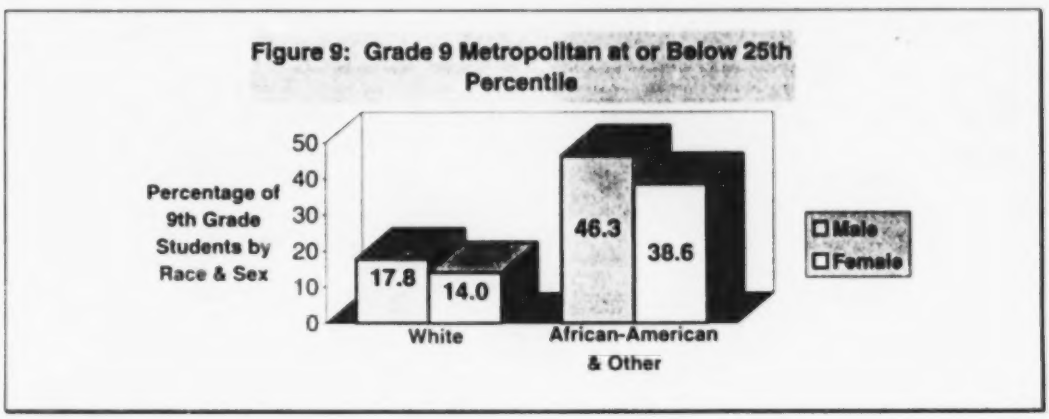
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	390	20.4	338	17.7
White Males	82	13.2	82	13.1
White Females	93	14.5	60	9.4
African-American & Other Males	102	32.4	110	34.8
African-American & Other Females	112	34.1	83	25.5

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

492 students at or below 25th percentile

25.2% students at or below 25th percentile

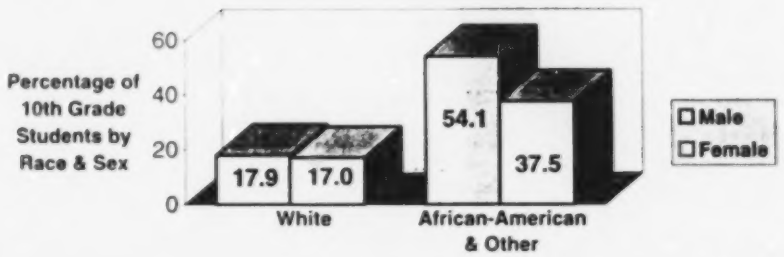


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

420 students not passing all parts

26.7% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



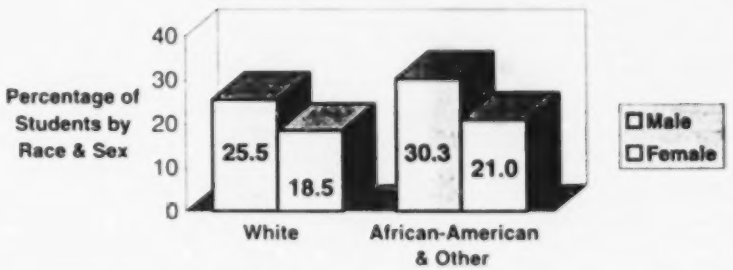
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 54.5% to 23.7% in math and from 48.5% to 15.6% in reading. During the 1990s the trend altered, with 20.4% not meeting 8th grade math standards in 1996 and 17.7% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 30.1% in 1983 on the CTBS, 33.7% in 1990 on the Stanford, and 26.1% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 32.1% in 1990 and 26.5% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

1,672 students drop out

23.3% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 30.5% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 23.5% during 1985-89, and 23.5% during 1990-94. During the 1995-96 period, 96.6% of all who did graduate received the State High School Diploma, while 1.8% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 1.5% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 61 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 150 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 17.6% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 17.7% to 26.7%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 713 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 10.2% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

9.2%	White Males	11.9%	African-American & Other Males
9.1%	White Females	13.5%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 160 girls between the ages of 14 and 17 became pregnant in 1993 and 158 in 1994. In 1994, this represented 4.3% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 3.3% for Whites and 6.4% for African-Americans and others. Of all pregnancies to 14-17 year olds, 82.9% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it increased by 2.4%.

Alcohol Use: In 1992-93, 19.2% of 7th and 8th graders and 40.5% of high schoolers said they had used alcohol in the past month. Of White males, 36.8% had used it in the past month, compared with 33.2% of African-American males; likewise, 30.7% of White females said they had used alcohol, compared with 27.2% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 17.5% had used alcohol by age 11 or younger, 37.2% by age 13, and 60.9% by age 15.

During the previous year, 35.9% of 7th and 8th graders and 43.2% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 27.3% said they had driven after drinking, and 8.8% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 60.9% of eighth graders and 88.6% of seniors felt that beer was easy to get; 49.1% of eighth graders and 49.7% of seniors felt there was not a great risk in using it regularly.

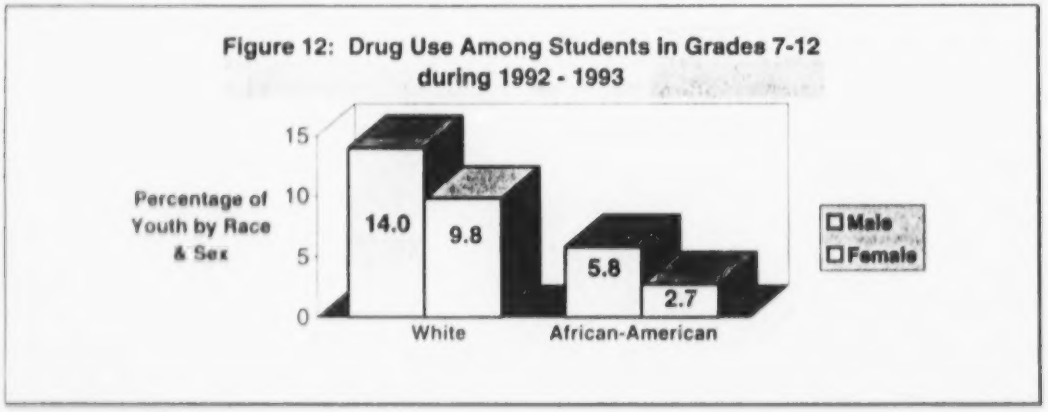
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 30.8% of all high school students in 1992-93 responded 3 or more drinks at a time; 17.6% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 4.9% of 7th and 8th graders and 12.1% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (14.0%) and White females (9.8%); use among African-American males was 5.8%; African-American females, 2.7%. Some young people first used drugs at an early age: among students 15 and older, 2.9% experienced their first use by age 11 or sooner; 7.9% had used a drug by age 13, and 16.1% by age 15.

Of seniors who had initiated use of marijuana, 12.6% had started use at home, 46.0% at a friend's home, and 41.4% elsewhere. During the past year, 3.6% of all high school students said that they used marijuana at home, 9.3% at a friend's house, and 5.4% in a car. In the past year, 6.2% of all high school students who drive and 10.5% of seniors who drive said that they had driven after using drugs . Furthermore, 6.0% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 25.5% of 8th graders who had an opinion said it is easy to get marijuana and 19.1% said it is easy to get cocaine or crack; 75.8% of seniors who had an opinion said it is easy to get marijuana and 61.3% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 19.6% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 574 individual juvenile offenders in the county were referred to the Solicitor; of these, 11.5% were age 12 or younger, 28.7% were 13 or 14, and 59.8% were 15 or older.

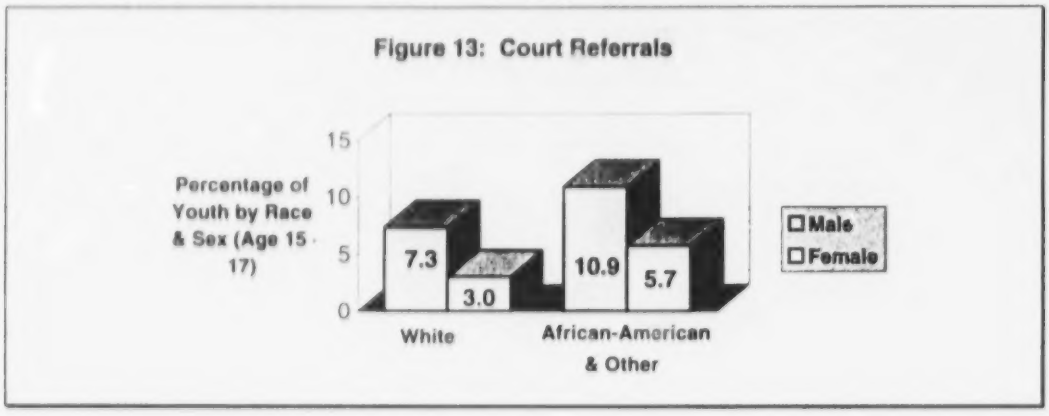
Of the referrals to the family court, 10.1% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 186 juvenile cases constituting 19.3% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 29.4% lived in families with income under $10,000, 32.7% with $10,000-$19,999 and 37.8% with $20,000 or more. Furthermore, only 24.2% of delinquents lived with both natural parents, while 43.8% lived in a single parent household and 32.0% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 38.7% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 34.3% had at least one prior referral and 15.5% had been referred to court 3 times or more.

In 1994-95, there were 30 juvenile commitments from the county to State institutions.

During 1994-95, 343 youth ages 15 to 17 were referred to the family courts. In the county, 6.2% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 44 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 15 deaths between 1990 and 1994; homicides killed 6 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 22.5% of children in single-parent families, 19.0% in poverty, 23.3% dropping out of school, 40.5% of high school students using alcohol and 19.6% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

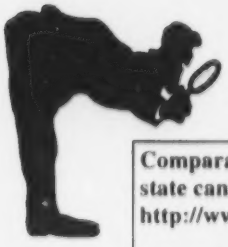
This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

Dr. A. Baron Holmes (803-734-2291) E-mail bholmes@ogc.state.sc.us
-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.



Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

AIKEN

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	133	7.0	7.3	0.96	12	1994
Births to Mothers Not Completing High School	409	21.6	21.8	0.99	12	1994
Births to Single Mothers	596	31.5	30.4	1.04	16	1994
Children in Single-Parent Families	6,674	22.5	25.1	0.90	11	1990
Parents Working	9,473	71.9	74.3	0.97	12	1990
Abuse & Neglect Victims	364	1.0	1.0	1.00	22	1995-96
Separation from Parents	1,473	4.4	5.1	0.86	10	1990
Economic Status						
Poor Children	6,225	19.0	21.0	0.90	14	1989
Mean Income of Families with Children	$39,351	NA	NA	1.11	4	1989
Health						
Less than Adequate Prenatal Care	673	35.5	32.0	1.11	30	1994
Low Birth Weight	156	8.2	9.2	0.89	10	1994
Not Adequately Immunized	192	10.0	18.0	0.56	15	1995
Cigarette Smokers (High School)	1,378	23.6	23.1	1.02	30	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	683	33.6	28.1	1.20	38	1994-95
1st Grade Failures	191	9.2	6.8	1.35	29	1994-95
Failures grades 1-3 (approx. %)	272	13.3	11.3	1.18	24	1994-95
Overage for Grade 3	282	15.6	16.2	0.96	20	1995-96
Special Education (ages 8 and 9)	505	13.5	15.3	0.88	16	1995-96
School Achievement						
Special Education Grades 1 - 12	2,414	10.8	13.0	0.83	7	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	437	24.0	27.9	0.86	11	1995-96
Grade 8 BSAP - Math (Below standards)	390	20.4	34.8	0.59	2	1995-96
Grade 8 BSAP - Reading (Below standards)	338	17.7	28.8	0.61	2	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	492	25.2	29.5	0.85	11	1995-96
Exit Exam (Not passing all parts on 1st attempt)	420	26.7	35.3	0.76	2	1995-96
Dropout Rate	1,672	23.3	27.3	0.85	7	1992-95
25-34 Year olds with no HS Degree or GED	3,600	17.6	19.1	0.92	10	1990
Adolescent Risk Behavior						
Not in School or Employed	713	10.2	9.6	1.06	21	1990
Pregnancy (Ages 14 - 17)	158	4.3	4.8	0.90	10	1994
Alcohol Use (High School)	2,365	40.5	37.4	1.08	39	1992-93
Drug Use (High School)	707	12.1	12.8	0.95	30	1992-93
Binge Drinking (5 or more drinks)	1,028	17.6	16.3	1.08	33	1992-93
Delinquency (ages 15 - 17)	343	6.2	6.4	0.97	24	1994-95

* 1 = "best" 46 = "worst"

AIKEN TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	112	5.6	0.85	1992	111	5.7	0.86	1993	133	7.0	0.96	1994
Births to Mothers Not Completing High School	412	20.6	0.87	1992	397	20.4	0.91	1993	409	21.6	0.99	1994
Births to Single Mothers	571	28.6	0.94	1992	583	30.0	0.99	1993	596	31.5	1.04	1994
Children in Single-Parent Families		12.4	0.86	1970		17.2	0.91	1980	6,674	22.5	0.90	1990
Economic Status												
Poor Children		20.8	0.72	1969		16.1	0.76	1979	6,225	19.0	0.90	1989
Mean Income of Families with Children					34,566	N/A	0.96	1979	39,351	N/A	0.90	1989
Health												
Less than Adequate Prenatal Care	848	42.4	1.07	1992	666	34.2	0.97	1993	673	35.5	1.11	1994
Low Birth Weight	164	8.2	0.91	1992	165	8.5	0.91	1993	156	8.2	0.89	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	734	33.1	1.24	1990-91	759	38.0	1.37	1992-93	683	33.6	1.20	1994-95
1st Grade Failures	235	10.8	1.20	1991-92	192	9.8	1.01	1992-93	191	9.2	1.35	1994-95
Failures Grades 1-3 (approx. %)	297	14.0	0.99	1991-92	232	12.1	0.85	1992-93	272	13.3	1.18	1994-95
Overage for Grade 3	513	26.7	1.03	1991-92	365	19.1	0.93	1993-94	282	15.6	0.96	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	358	18.7	0.97	1991-92	324	17.2	0.87	1993-94	437	24.0	0.86	1995-96*
Grade 8 BSAP - Math (Below Standards)	429	24.8	0.92	1991-92	369	20.2	0.65	1993-94	390	20.4	0.59	1995-96
Grade 8 BSAP - Reading (Below Standards)	279	16.1	0.66	1991-92	365	20.0	0.69	1993-94	338	17.7	0.61	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	416	21.8	1.00	1991-92	417	21.0	0.86	1993-94	492	25.2	0.85	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	442	28.4	0.91	1991-92	451	29.0	0.89	1993-94	420	26.7	0.76	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	152	4.2	0.89	1992	160	4.4	0.98	1993	158	4.3	0.90	1994
Alcohol Use (High School)	2,500	43.7	1.09	1989-90					2,365	40.5	1.08	1992-93
Drug Use (High School)	736	12.9	0.96	1989-90					707	12.1	0.95	1992-93
Binge Drinking (5 or more drinks)		17.5	1.12	1989-90					1,028	17.6	1.08	1992-93

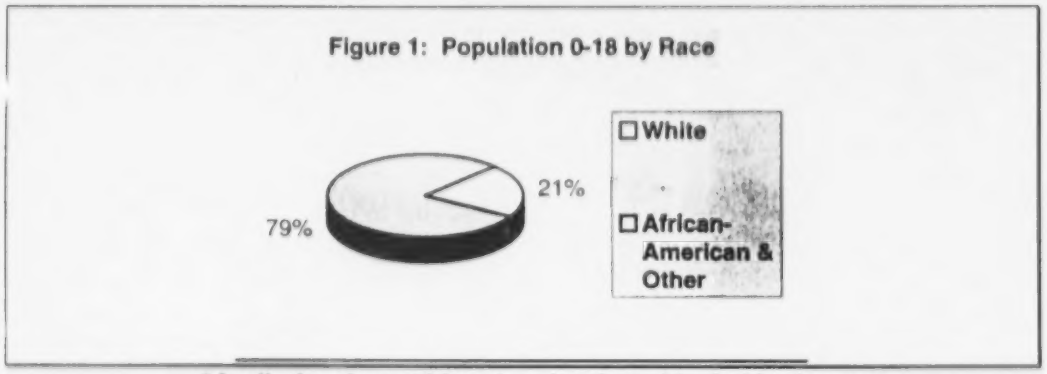
SOUTH CAROLINA kids count

1996 Report ALLENDALE

DEMOGRAPHICS

In 1994, there were 3,460 children under age 18 in the county. Of these, 720 were White and 2,750 were African-American and Other races. There were 3,620 children under age 18 in 1980, 3,706 in 1970, and 5,119 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 29.6% of the population in 1994, down from 45.1% in 1960, 38.2% in 1970 and 33.8% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 34.2% of all households in 1990, as compared with 42.0% of households in 1960, had children below the age of 18.

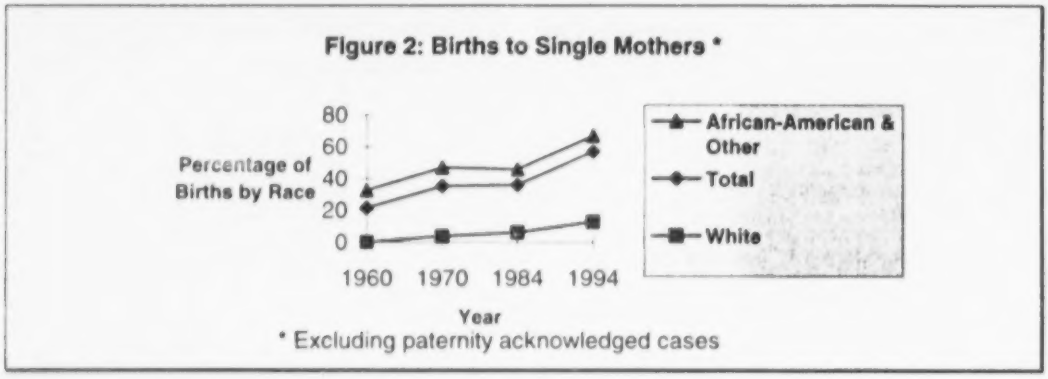
Births to Teen Mothers: In 1994, 21 babies were born to mothers younger than age 18. These babies were 12.2% of all children born in the county; 0.0% of all White babies and 14.9% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 95.2% were born to single mothers.

In 1994, 43 babies were born to mothers younger than age 20. These babies were 25.0% of all children born in the county; 9.7% of all White babies and 28.4% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 90.7% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 57 babies, 33.1% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 52.5% in 1970.

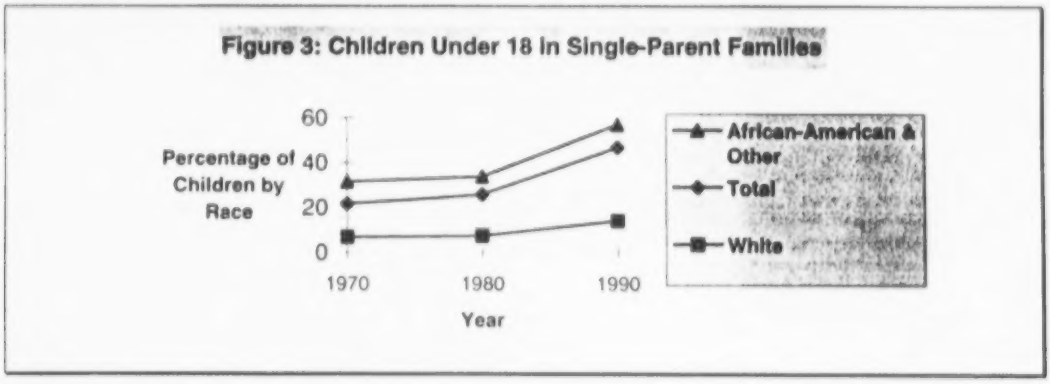
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 98 babies, 57.0% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 36.0% and in 1960 it was 21.4%. In 1994, 12.9% of White children and 66.7% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 7 babies, 4.1% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 105, constituting 61.0% of all babies, 12.9% of White babies, and 71.6% of African-American and Others.



Divorce Rate: In 1994, 185 marriage licenses were issued, while 17 divorce decrees involving 13 children were filed. In 1970 only 6 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 1,253 children lived with only one parent. This was 46.8% of all children, up from 25.8% in 1980 and 21.6% in 1970. In 1990, 14.0% of White children and 57.0% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 56.6% of mothers with children under 6 and 72.3% with children 6 - 17 were in the labor force. This has increased substantially from 46.8% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 188 children investigated as alleged child abuse and neglect victims: 33.0% for physical abuse, 8.5% for sexual abuse, 71.3% for neglect, and 46.3% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 61 children were victims of abuse and neglect: of these 42.6% were male and 57.4% were female; 4.9% were White, and 95.1% were African-American and Other. By age, 36.1% were 0 - 5, 45.9% were 6 - 12, and 18.0% were 13 - 17. They constituted 1.8% of all children age 18 or younger; 0.4% of all Whites and 2.1% of all African-Americans and Others. In the verified cases, 9.8% of abused and neglected children lived in two parent families, 68.9% in single parent families, 8.2% with extended families, and 13.1% in other circumstances.

Family Violence: In 1994, 71 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 34.0% of all assaults, which include both simple and aggravated assaults. Overall, 71.8% of all domestic assaults involve spouse abuse (constituting 24.2% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 8.4% of all children did not live with their natural parents; of these, 251 or 7.2% of children lived with relatives, 22 or 0.6% lived with non-relatives, and 20 were in institutional facilities.

Out of Home Placements: As of September 30, 1996, 22 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 4.5% 0-2, 13.6% 3-5, 31.8% 6-10, 22.7% 11-13, and 27.3% 14 and above. The foster care population is comprised of 50.0% males and 50.0% females. Regarding their future, 18.2% were under a plan for placement in adoptive homes, 50.0% for return to a parent or guardian, 18.2% for placement with a relative, 9.1% for independent living, 4.5% for permanent foster care, and 0.0% for other circumstances.

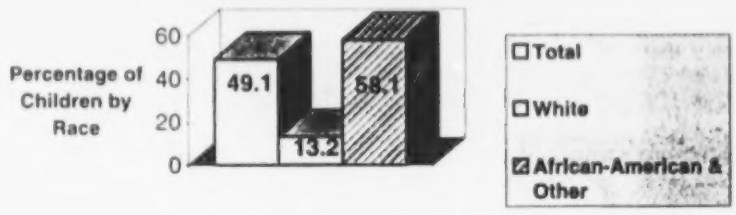
Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.38 adults for every person below age 18. This was up substantially from 1960, when there were only 1.22 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 1,701 children and youth under the age of 18 lived in families with incomes below poverty. Over 49.1% of all children and youth lived below poverty: 13.2% of Whites and 58.1% of African-Americans and others.

Figure 4: Children Living in Poverty



Poverty has always been a serious problem. While the rate among children under age 18 was 49.1% in 1989, it was 38.5% in 1979 and 43.2% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 55.3% of children 0 - 5 and 46.3% of children 6 - 17 lived in poverty; 38.1% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 77.9% of children in single-parent families lived in poverty, but only 18.5% of children in married-couple families were poor. Children in single-parent families made up 80.9% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 2,012 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 311 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	3,467	1,701	2,012	2,212	2,412	2,472	2,522
Percent		49.1%	58.0%	63.8%	69.6%	71.3%	72.7%
White	696	92	115	145	178	186	224
Percent		13.2%	16.5%	20.8%	25.6%	26.7%	32.2%
African-American and Other	2,771	1,609	1,897	2,067	2,234	2,286	2,298
Percent		58.1%	68.5%	74.6%	80.6%	82.5%	82.9%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 24.6% of households did not have a car; 10.3% of Whites and 32.7% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 19.2% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 40.0% of households had no phone.

Income: The mean income of families with children in 1989 was $24,999; in 1979, it had been $28,185, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 12.5%.

The mean income of single-parent families with children was $11,212 in 1989, as compared with $35,176 in married-couple families with children.

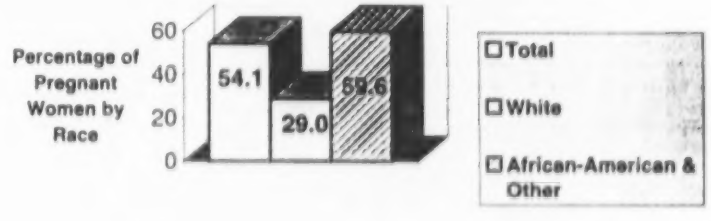
Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 488 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 50.8% had child support court orders. The average monthly payment of child support was $147.76, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 117 parents in non-AFDC families were obligated to pay a monthly average of $271.66. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 67 or 39.0% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 93 or 54.1% of pregnant women received less than adequate prenatal care: 9 or 29.0% of Whites and 84 or 59.6% of African-Americans and Others. In that same year, 6 women received no prenatal care at all.

Figure 5: Less than Adequate Prenatal Care



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 20 or 11.6% of all babies in the county were born with low birthweight. Over 12.1% of African-American babies and 9.7% of White babies were born with low birthweight. During 1992-94, approximately 16 or 2.8% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 19.7%. For Whites, the rate decreased by 61.9%, while for African-Americans and Others, the rate decreased by 11.1%. Over the three-year period 1992-94, 1 White and 11 African-American and Other infants died before age one. By comparison, 3 White and 13 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 0 White and 3 African-American and Other children ages 1-14 died in the county. During 1982-84, 1 White and 4 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 29.6% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 7.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 135 to 203 youth ages 13-19 in the county were infected with a STD. In the county, there were no reported cases of children under age 15 and 17 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 12.2% first smoked by age 11, 21.0% by age 13, and 26.9% by age 15. In a typical month, 8.5% of 7th and 8th graders and 9.4% of high school students smoked cigarettes.' White youths are much more likely than African-Americans to smoke: 26.9% of White 7th to 12th graders used cigarettes, in comparison with 5.8% African-Americans. A smaller but significant group of high school students (2.2%) used smokeless tobacco monthly; it was used primarily by White males (24.3%) compared with 0.2% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 346 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 52 students in grades 1-12 with learning disabilities and 69 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 232 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 512 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 3 nurses; 1 are currently available.

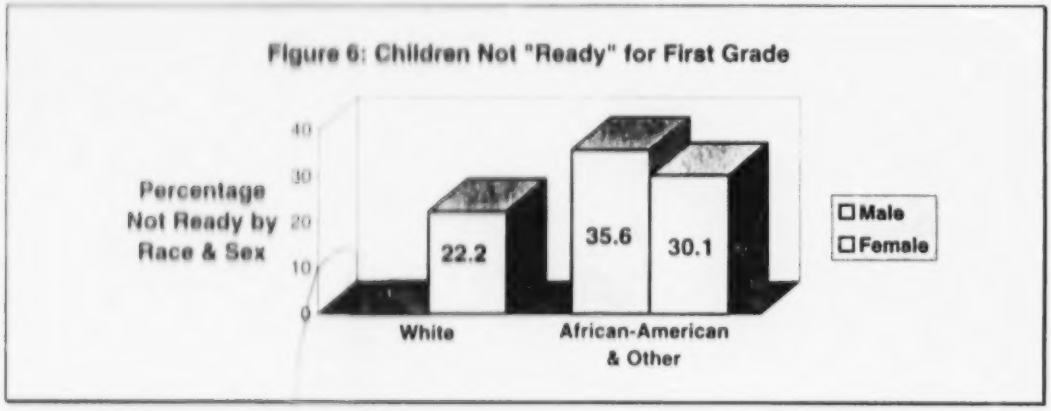
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 48.3% for Whites and 37.7% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

65 children not ready **31.6% children not ready**

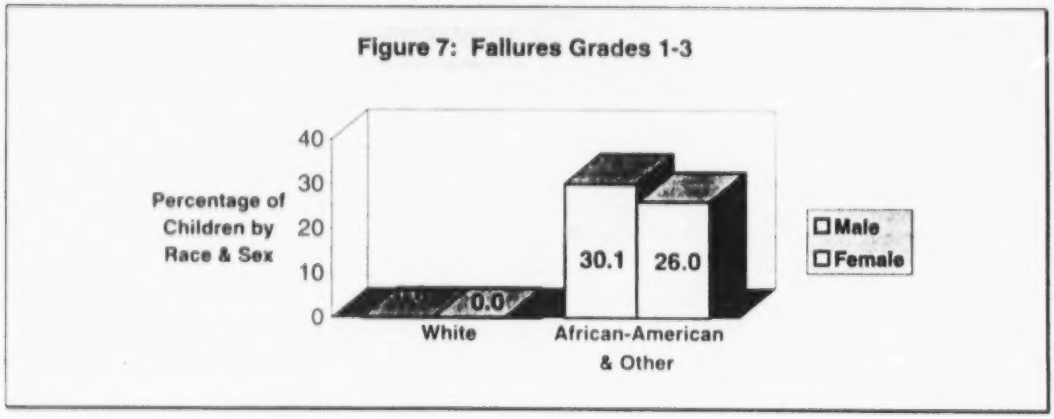


1st Grade Failures in 1995:

39 children failing **18.5% children failing**

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

53 children failing **26.2% children failing**



Overage for Grade 3 in 1996:

48 children overage	29.6% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 48 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 14.0% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 31.6% assessed not ready for the 1st grade, 29.6% overage in grade 3, and 14.0% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

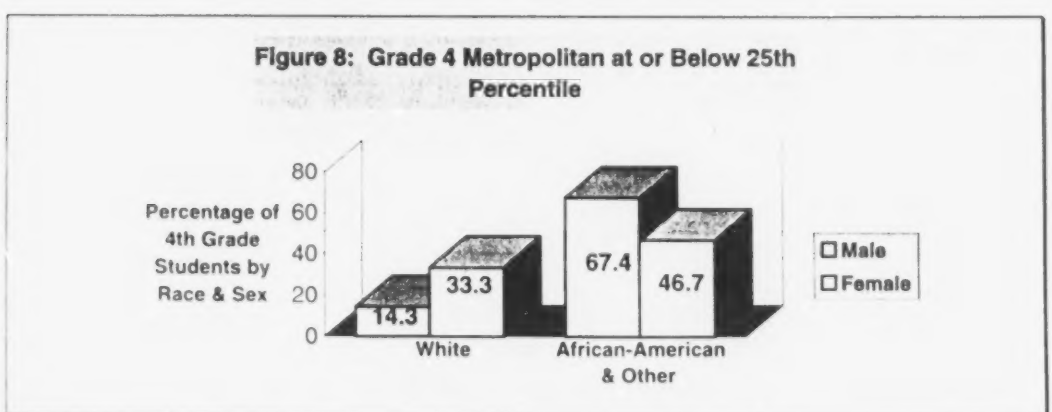
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 69 speech and language impaired, 52 learning disabled, 5 emotionally disabled, 125 mentally impaired, and 2 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 12.6% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

97 children at or below 25th percentile	54.8% children at or below 25th percentile



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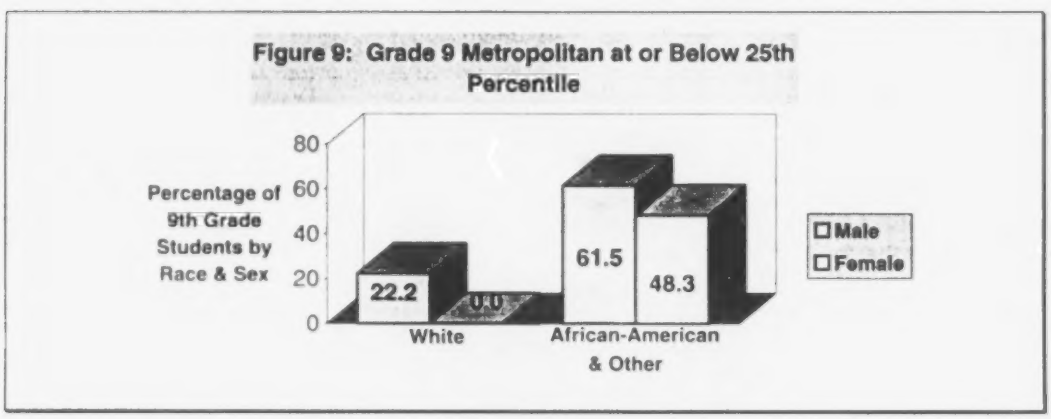
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	44	27.3	79	48.8
White Males	2	15.4	1	7.7
White Females	3	37.5	2	25.0
African-American & Other Males	18	26.5	39	56.5
African-American & Other Females	21	29.2	37	51.4

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

94 students
at or below 25th percentile

51.9% students
at or below 25th percentile

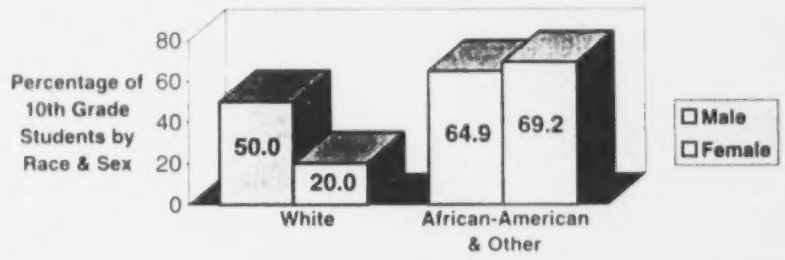


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

78 students
not passing
all parts

63.9% students
not passing
all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



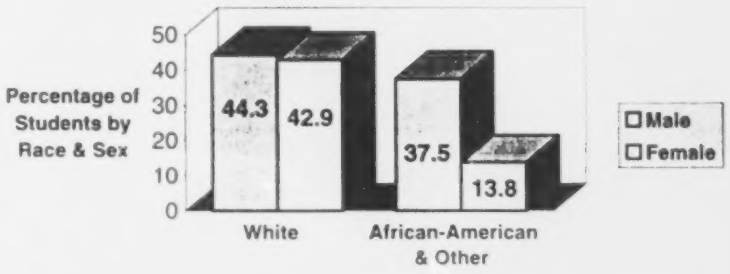
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 60.4% to 20.8% in math and from 58.4% to 36.1% in reading. During the 1990s the trend altered, with 27.3% not meeting 8th grade math standards in 1996 and 48.8% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 42.5% in 1983 on the CTBS, 58.6% in 1990 on the Stanford, and 55.8% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 41.7% in 1990 and 52.9% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

223 students drop out

29.4% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 29.5% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 29.4% during 1985-89, and 29.6% during 1990-94. During the 1995-96 period, 93.1% of all who did graduate received the State High School Diploma, while 6.9% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 0.0% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 8 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 5 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 29.8% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 27.3% to 63.9%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 179 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 22.9% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

30.6%	White Males	30.2%	African-American & Other Males
4.9%	White Females	16.1%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 30 girls between the ages of 14 and 17 became pregnant in 1993 and 29 in 1994. In 1994, this represented 8.1% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 0.0% for Whites and 10.4% for African-Americans and others. Of all pregnancies to 14-17 year olds, 72.4% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 19.5%.

Alcohol Use: In 1992-93, 21.2% of 7th and 8th graders and 32.5% of high schoolers said they had used alcohol in the past month. Of White males, 50.8% had used it in the past month, compared with 27.7% of African-American males; likewise, 39.3% of White females said they had used alcohol, compared with 22.2% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 13.4% had used alcohol by age 11 or younger, 27.7% by age 13, and 42.8% by age 15.

During the previous year, 36.0% of 7th and 8th graders and 41.0% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 22.6% said they had driven after drinking, and 10.5% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 49.6% of eighth graders and 76.4% of seniors felt that beer was easy to get; 49.5% of eighth graders and 43.1% of seniors felt there was not a great risk in using it regularly.

No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

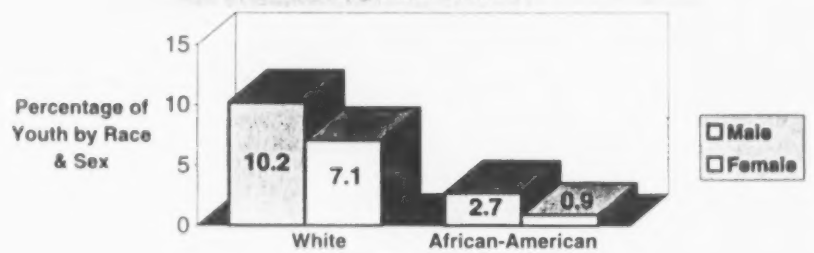
Heavy Drinking: When asked how many drinks, if any, they usually consume, 18.8% of all high school students in 1992-93 responded 3 or more drinks at a time; 11.6% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 2.7% of 7th and 8th graders and 2.9% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (10.2%) and White females (7.1%); use among African-American males was 2.7%; African-American females, 0.9%. Some young people first used drugs at an early age: among students 15 and older, 1.7% experienced their first use by age 11 or sooner; 3.8% had used a drug by age 13, and 6.4% by age 15.

Of seniors who had initiated use of marijuana, 12.7% had started use at home, 25.3% at a friend's home, and 62.0% elsewhere. During the past year, 0.6% of all high school students said that they used marijuana at home, 1.8% at a friend's house, and 1.2% in a car. In the past year, 2.5% of all high school students who drive and 3.8% of seniors who drive said that they had driven after using drugs . Furthermore, 3.7% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 18.8% of 8th graders who had an opinion said it is easy to get marijuana and 20.0% said it is easy to get cocaine or crack; 46.1% of seniors who had an opinion said it is easy to get marijuana and 33.9% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 4.7% rate for county high school students in 1995.

Figure 12: Drug Use Among Students in Grades 7-12 during 1992 - 1993



Juvenile Delinquency: In 1994-95, 140 individual juvenile offenders in the county were referred to the Solicitor; of these, 13.6% were age 12 or younger, 36.4% were 13 or 14, and 50.0% were 15 or older.

Of the referrals to the family court, 14.1% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 11 juvenile cases constituting 5.4% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

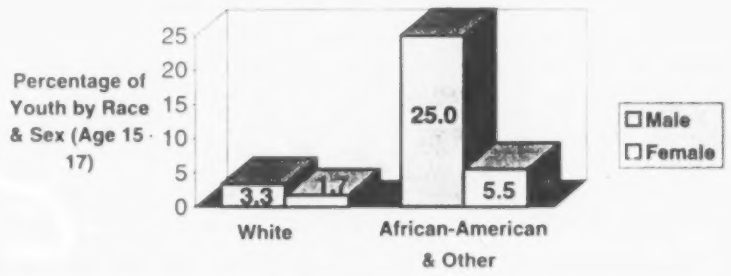
Delinquents are likely to live in families with low income: 61.0% lived in families with income under $10,000, 28.7% with $10,000-$19,999 and 10.3% with $20,000 or more. Furthermore, only 10.9% of delinquents lived with both natural parents, while 57.7% lived in a single parent household and 31.4% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 58.4% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 51.4% had at least one prior referral and 28.6% had been referred to court 3 times or more.

In 1994-95, there were 6 juvenile commitments from the county to State institutions.

During 1994-95, 70 youth ages 15 to 17 were referred to the family courts. In the county, 12.1% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.

Figure 13: Court Referrals



Deaths: During 1990-94, 2 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 1 deaths between 1990 and 1994; homicides killed 0 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 46.8% of children in single-parent families, 49.1% in poverty, 29.4% dropping out of school, 32.5% of high school students using alcohol and 4.7% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

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SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

ALLENDALE

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	21	12.2	7.3	1.67	42	1994
Births to Mothers Not Completing High School	57	33.1	21.8	1.52	43	1994
Births to Single Mothers	98	57.0	30.4	1.88	46	1994
Children in Single-Parent Families	1,253	46.8	25.1	1.86	46	1990
Parents Working	802	66.7	74.3	0.90	2	1990
Abuse & Neglect Victims	61	1.8	1.0	1.80	43	1995-96
Separation from Parents	293	8.4	5.1	1.65	43	1990
Economic Status						
Poor Children	1,701	49.1	21.0	2.34	46	1989
Mean Income of Families with Children	$24,999	NA	NA	0.70	46	1989
Health						
Less than Adequate Prenatal Care	93	54.1	32.0	1.69	45	1994
Low Birth Weight	20	11.6	9.2	1.26	38	1994
Not Adequately Immunized	21	7.0	18.0	0.39	5	1995
Cigarette Smokers (High School)	48	9.4	23.1	0.41	1	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	65	31.6	28.1	1.12	33	1994-95
1st Grade Failures	39	18.5	6.8	2.72	41	1994-95
Failures grades 1-3 (approx. %)	53	26.2	11.3	2.32	40	1994-95
Overage for Grade 3	48	29.6	16.2	1.83	45	1995-96
Special Education (ages 8 and 9)	48	14.0	15.3	0.92	19	1995-96
School Achievement						
Special Education Grades 1 - 12	253	12.6	13.0	0.97	14	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	97	54.8	27.9	1.96	45	1995-96
Grade 8 BSAP - Math (Below standards)	44	27.3	34.8	0.78	7	1995-96
Grade 8 BSAP - Reading (Below standards)	79	48.8	28.8	1.69	43	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	94	51.9	29.5	1.76	44	1995-96
Exit Exam (Not passing all parts on 1st attempt)	78	63.9	35.3	1.81	46	1995-96
Dropout Rate	223	29.4	27.3	1.08	28	1992-95
25-34 Year olds with no HS Degree or GED	565	29.8	19.1	1.56	40	1990
Adolescent Risk Behavior						
Not in School or Employed	179	22.9	9.6	2.39	46	1990
Pregnancy (Ages 14 - 17)	29	8.1	4.8	1.69	46	1994
Alcohol Use (High School)	166	32.5	37.4	0.87	10	1992-93
Drug Use (High School)	15	2.9	12.8	0.23	2	1992-93
Binge Drinking (5 or more drinks)	59	11.6	16.3	0.71	8	1992-93
Delinquency (ages 15 - 17)	70	12.1	6.4	1.89	44	1994-95

* 1 = "best" 46 = "worst"

ALLENDALE TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	21	11.1	1.68	1992	23	11.4	1.73	1993	21	12.2	1.67	1994
Births to Mothers Not Completing High School	58	30.5	1.29	1992	54	26.9	1.20	1993	57	33.1	1.52	1994
Births to Single Mothers	101	53.2	1.76	1992	130	64.7	2.14	1993	98	57.0	1.88	1994
Children in Single-Parent Families		21.6	1.49	1970		25.8	1.37	1980	1,253	46.8	1.86	1990
Economic Status												
Poor Children		43.2	1.51	1969		38.5	1.82	1979	1,701	49.1	2.34	1989
Mean Income of Families with Children					28,185	N/A	1.17	1979	24,999	N/A	1.42	1989
Health												
Less than Adequate Prenatal Care	116	61.1	1.55	1992	101	50.2	1.42	1993	93	54.1	1.69	1994
Low Birth Weight	28	14.7	1.63	1992	16	8.0	0.86	1993	20	11.6	1.26	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	67	31.3	1.18	1990-91	77	36.7	1.32	1992-93	65	31.6	1.12	1994-95
1st Grade Failures	1	0.5	0.06	1991-92	41	21.8	2.25	1992-93	39	18.5	2.72	1994-95
Failures Grades 1-3 (approx. %)	42	22.8	1.62	1991-92	60	33.8	2.36	1992-93	53	26.2	2.32	1994-95
Overage for Grade 3	60	31.7	1.22	1991-92	65	38.9	1.90	1993-94	48	29.6	1.83	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	55	30.9	1.60	1991-92	40	28.0	1.41	1993-94	97	54.8	1.96	1995-96*
Grade 8 BSAP - Math (Below Standards)	22	15.4	0.57	1991-92	34	20.6	0.67	1993-94	44	27.3	0.78	1995-96
Grade 8 BSAP - Reading (Below Standards)	53	37.3	1.53	1991-92	78	47.9	1.66	1993-94	79	48.8	1.69	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	60	35.5	1.62	1991-92	85	45.0	1.85	1993-94	94	51.9	1.76	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	78	50.6	1.63	1991-92	57	50.4	1.54	1993-94	78	63.9	1.81	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	31	8.6	1.83	1992	30	8.3	1.84	1993	29	8.1	1.69	1994
Alcohol Use (High School)	231	39.5	0.98	1989-90					166	32.5	0.87	1992-93
Drug Use (High School)	40	6.8	0.51	1989-90					15	2.9	0.23	1992-93
Binge Drinking (5 or more drinks)		12.5	0.80	1989-90					59	11.6	0.71	1992-93

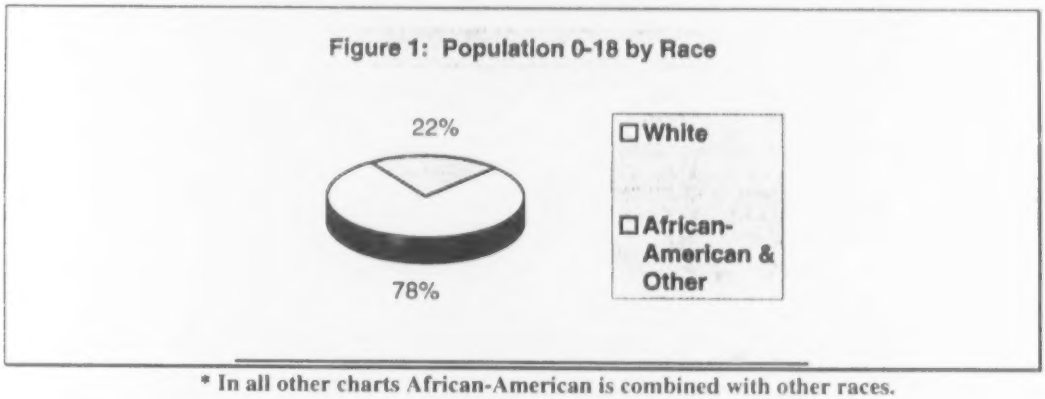
SOUTH CAROLINA kids count

1996 Report ANDERSON

DEMOGRAPHICS

In 1994, there were 37,780 children under age 18 in the county. Of these, 29,470 were White and 8,310 were African-American and Other races. There were 38,678 children under age 18 in 1980, 35,713 in 1970, and 36,869 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 24.7% of the population in 1994, down from 37.4% in 1960, 33.9% in 1970 and 29.0% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 33.9% of all households in 1990, as compared with 44.0% of households in 1960, had children below the age of 18.

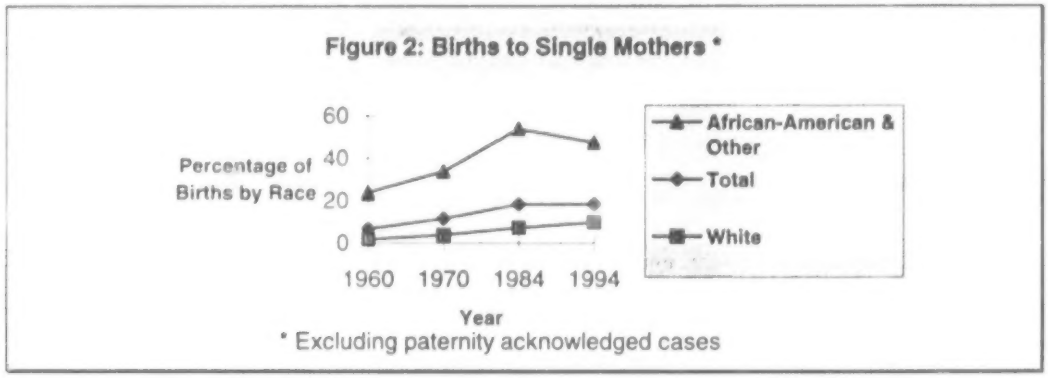
Births to Teen Mothers: In 1994, 148 babies were born to mothers younger than age 18. These babies were 7.4% of all children born in the county; 5.7% of all White babies and 13.3% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 53.4% were born to single mothers.

In 1994, 340 babies were born to mothers younger than age 20. These babies were 17.0% of all children born in the county; 14.6% of all White babies and 25.4% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 46.5% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 463 babies, 23.2% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 44.8% in 1970.

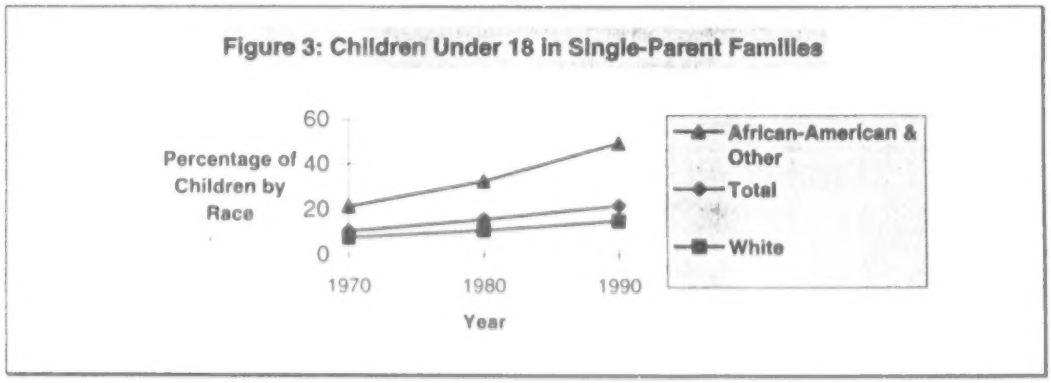
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 364 babies, 18.2% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 18.2% and in 1960 it was 6.7%. In 1994, 9.8% of White children and 47.4% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 264 babies, 13.2% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 628, constituting 31.4% of all babies, 19.9% of White babies, and 71.7% of African-American and Others.



Divorce Rate: In 1994, 1,212 marriage licenses were issued, while 919 divorce decrees involving 764 children were filed. In 1970 only 410 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 6,929 children lived with only one parent. This was 21.6% of all children, up from 15.5% in 1980 and 10.2% in 1970. In 1990, 14.9% of White children and 49.4% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 67.8% of mothers with children under 6 and 81.1% with children 6 - 17 were in the labor force. This has increased substantially from 44.0% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 847 children investigated as alleged child abuse and neglect victims: 35.2% for physical abuse, 8.3% for sexual abuse, 66.0% for neglect, and 31.8% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 353 children were victims of abuse and neglect: of these 50.6% were male and 49.4% were female; 68.2% were White, and 31.8% were African-American and Other. By age, 46.7% were 0 - 5, 32.6% were 6 - 12, and 20.7% were 13 - 17. They constituted 0.9% of all children age 18 or younger; 0.8% of all Whites and 1.3% of all African-Americans and Others. In the verified cases, 37.4% of abused and neglected children lived in two parent families, 25.5% in single parent families, 8.8% with extended families, and 28.3% in other circumstances.

Family Violence: In 1994, 1,586 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 38.0% of all assaults, which include both simple and aggravated assaults. Overall, 63.1% of all domestic assaults involve spouse abuse (constituting 24.2% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 4.4% of all children did not live with their natural parents; of these, 1,130 or 3.1% of children lived with relatives, 412 or 1.1% lived with non-relatives, and 45 were in institutional facilities.

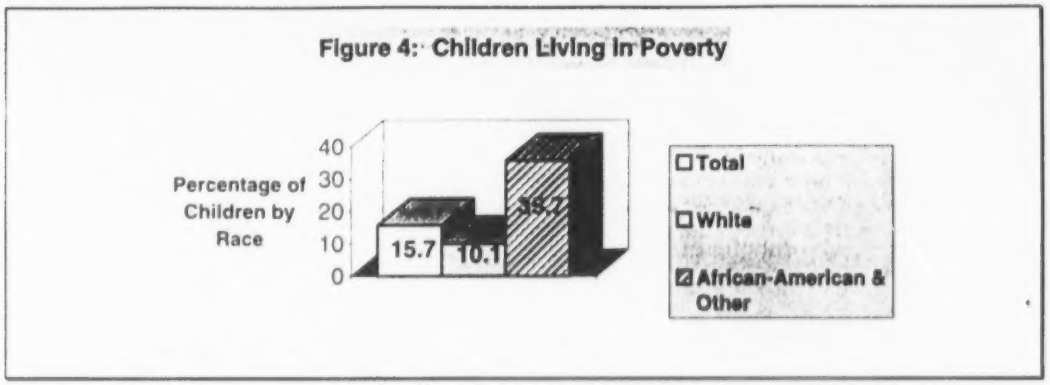
Out of Home Placements: As of September 30, 1996, 206 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 25.7% 0-2, 13.1% 3-5, 18.9% 6-10, 13.6% 11-13, and 28.6% 14 and above. The foster care population is comprised of 49.0% males and 51.0% females. Regarding their future, 12.6% were under a plan for placement in adoptive homes, 59.7% for return to a parent or guardian, 6.8% for placement with a relative, 10.2% for independent living, 9.2% for permanent foster care, and 1.5% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 3.04 adults for every person below age 18. This was up substantially from 1960, when there were only 1.67 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 5,610 children and youth under the age of 18 lived in families with incomes below poverty. Over 15.7% of all children and youth lived below poverty: 10.1% of Whites and 35.7% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 15.7% in 1989, it was 14.7% in 1979 and 17.3% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 18.6% of children 0 - 5 and 14.4% of children 6 - 17 lived in poverty; 19.0% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 41.6% of children in single-parent families lived in poverty, but only 7.7% of children in married-couple families were poor. Children in single-parent families made up 60.1% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 7,619 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 2,009 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	35,811	5,610	7,619	9,519	11,906	12,801	13,953
Percent		15.7%	21.3%	26.6%	33.2%	35.7%	39.0%
White	27,992	2,820	4,239	5,637	7,373	7,993	8,805
Percent		10.1%	15.1%	20.1%	26.3%	28.6%	31.5%
African-American and Other	7,819	2,790	3,380	3,882	4,533	4,808	5,148
Percent		35.7%	43.2%	49.6%	58.0%	61.5%	65.8%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 9.6% of households did not have a car; 7.1% of Whites and 24.1% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 8.6% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 22.4% of households had no phone.

Income: The mean income of families with children in 1989 was $37,133; in 1979, it had been $34,034, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 2.5%.

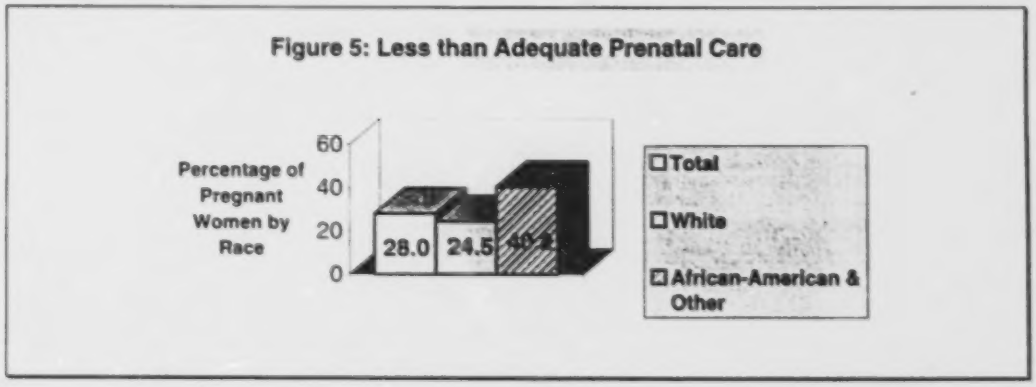
The mean income of single-parent families with children was $16,044 in 1989, as compared with $42,546 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 1,044 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 37.9% had child support court orders. The average monthly payment of child support was $148.10, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 981 parents in non-AFDC families were obligated to pay a monthly average of $203.18. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 299 or 15.0% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 560 or 28.0% of pregnant women received less than adequate prenatal care: 381 or 24.5% of Whites and 179 or 40.2% of African-Americans and Others. In that same year, 27 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 164 or 8.2% of all babies in the county were born with low birthweight. Over 13.9% of African-American babies and 6.6% of White babies were born with low birthweight. During 1992-94, approximately 94 or 1.6% of all babies were born with very low birthweight.

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Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 28.3%. For Whites, the rate decreased by 20.5%, while for African-Americans and Others, the rate decreased by 37.9%. Over the three-year period 1992-94, 45 White and 25 African-American and Other infants died before age one. By comparison, 50 White and 37 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 19 White and 9 African-American and Other children ages 1-14 died in the county. During 1982-84, 23 White and 12 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 43.9% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 17.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 1,526 to 2,289 youth ages 13-19 in the county were infected with a STD. In the county, there were 12 reported cases of children under age 15 and 129 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 15.5% first smoked by age 11, 36.3% by age 13, and 48.2% by age 15. In a typical month, 15.8% of 7th and 8th graders and 27.5% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 28.0% of White 7th to 12th graders used cigarettes, in comparison with 5.0% African-Americans. A smaller but significant group of high school students (11.3%) used smokeless tobacco monthly; it was used primarily by White males (25.9%) compared with 1.8% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 3,778 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 1,318 students in grades 1-12 with learning disabilities and 668 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 2,553 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 5,591 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 35 nurses; 7 are currently available.

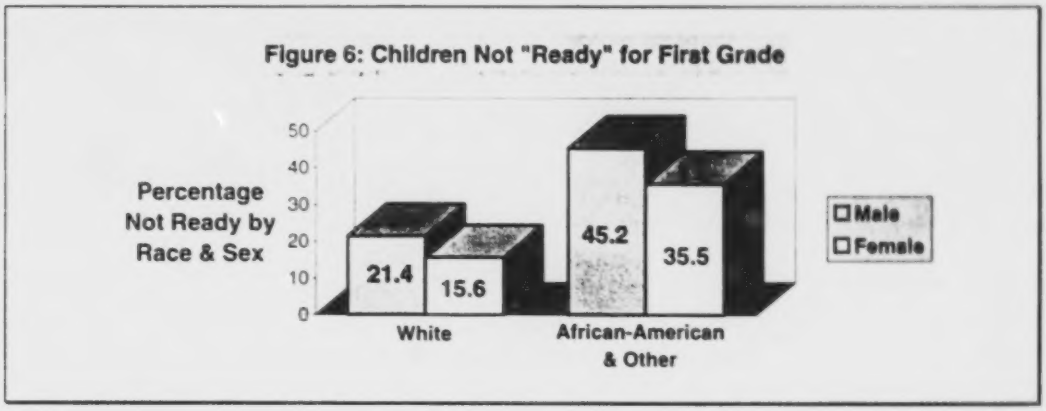
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 21.1% for Whites and 31.2% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

560 children not ready	24.5% children not ready

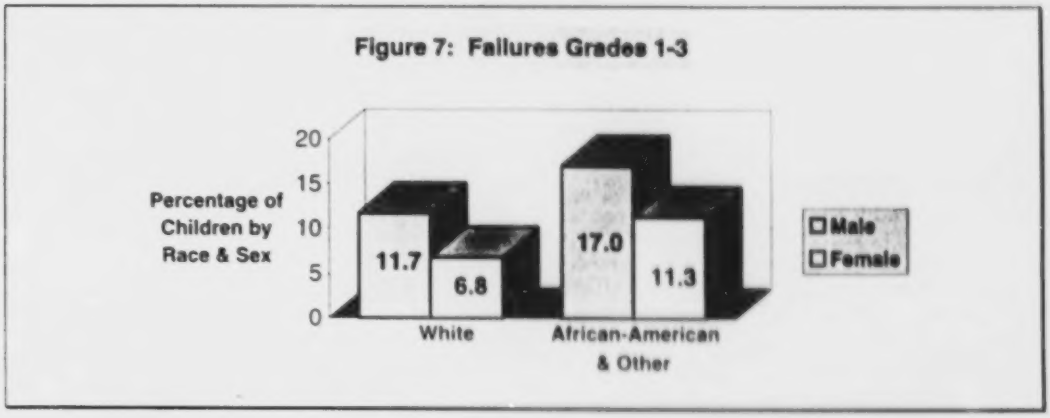


1st Grade Failures in 1995:

158 children failing	7.3% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

221 children failing	10.5% children failing



Overage for Grade 3 in 1996:

290 children overage	15.2% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 650 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 16.6% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 24.5% assessed not ready for the 1st grade, 15.2% overage in grade 3, and 16.6% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

SCHOOL ACHIEVEMENT

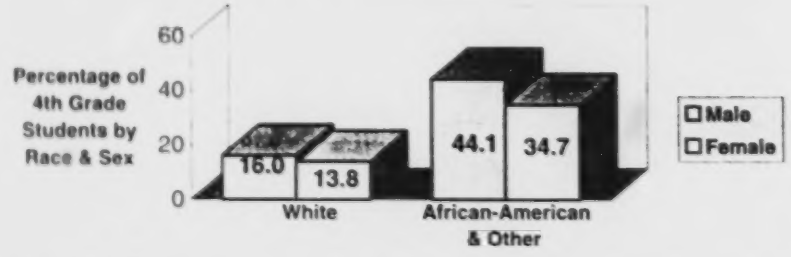
By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 668 speech and language impaired, 1,318 learning disabled, 261 emotionally disabled, 629 mentally impaired, and 65 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 12.6% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

371 children at or below 25th percentile	20.2% children at or below 25th percentile

Figure 8: Grade 4 Metropolitan at or Below 25th Percentile



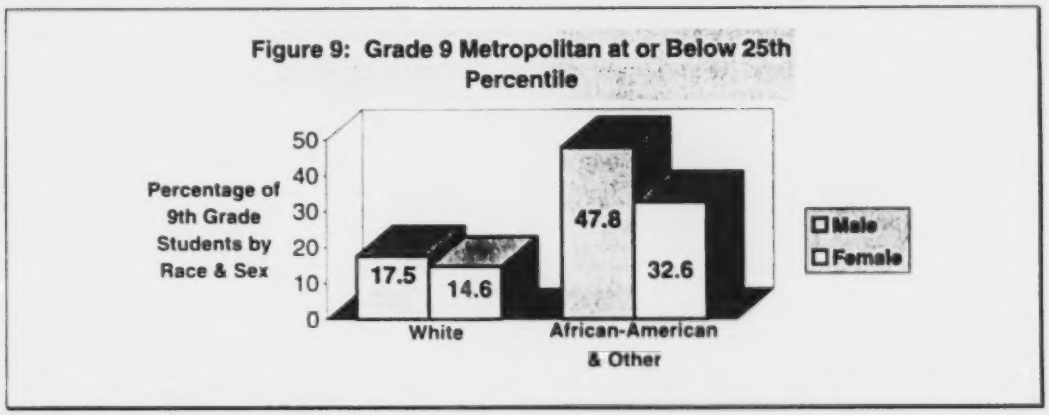
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	532	26.8	442	22.2
White Males	171	21.0	167	20.5
White Females	156	20.8	102	13.6
African-American & Other Males	99	49.7	92	45.8
African-American & Other Females	105	47.5	80	36.0

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

441 students at or below 25th percentile

21.6% students at or below 25th percentile

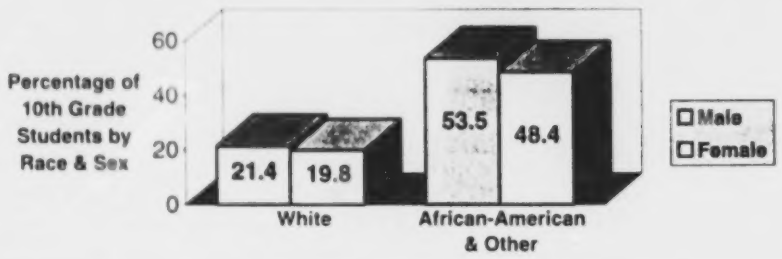


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

448 students not passing all parts

26.9% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



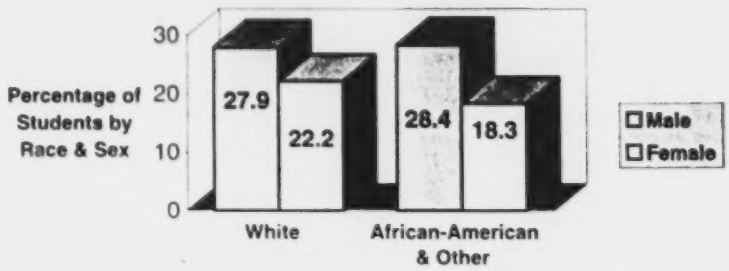
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 54.6% to 21.8% in math and from 39.9% to 18.9% in reading. During the 1990s the trend altered, with 26.8% not meeting 8th grade math standards in 1996 and 22.2% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 18.3% in 1983 on the CTBS, 25.2% in 1990 on the Stanford, and 25.1% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 28.2% in 1990 and 25.4% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

1,974 students drop out

24.7% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 30.7% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 30.0% during 1985-89, and 28.4% during 1990-94. During the 1995-96 period, 96.4% of all who did graduate received the State High School Diploma, while 1.6% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 2.1% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 105 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 308 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 20.7% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 20.2% to 26.9%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 899 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 10.1% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

6.4%	White Males	14.2%	African-American & Other Males
11.3%	White Females	16.2%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 212 girls between the ages of 14 and 17 became pregnant in 1993 and 197 in 1994. In 1994, this represented 4.6% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 3.8% for Whites and 7.4% for African-Americans and others. Of all pregnancies to 14-17 year olds, 74.6% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 3.4%.

Alcohol Use: In 1992-93, 19.0% of 7th and 8th graders and 37.4% of high schoolers said they had used alcohol in the past month. Of White males, 32.4% had used it in the past month, compared with 29.3% of African-American males; likewise, 31.6% of White females said they had used alcohol, compared with 21.1% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 16.3% had used alcohol by age 11 or younger, 38.1% by age 13, and 60.7% by age 15.

During the previous year, 32.1% of 7th and 8th graders and 44.5% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 28.5% said they had driven after drinking, and 6.8% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 57.7% of eighth graders and 89.0% of seniors felt that beer was easy to get; 46.1% of eighth graders and 44.8% of seniors felt there was not a great risk in using it regularly.

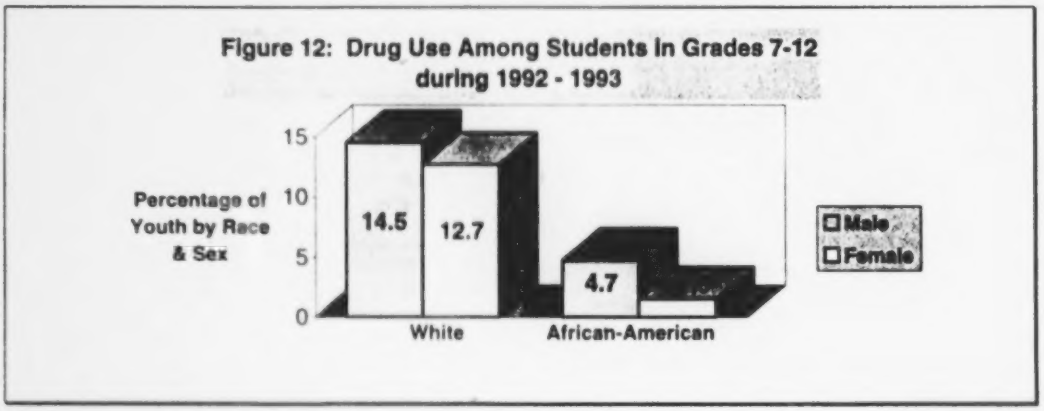
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 31.2% of all high school students in 1992-93 responded 3 or more drinks at a time; 19.0% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 6.9% of 7th and 8th graders and 14.0% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (14.5%) and White females (12.7%); use among African-American males was 4.7%; African-American females, 1.5%. Some young people first used drugs at an early age: among students 15 and older, 4.1% experienced their first use by age 11 or sooner; 11.3% had used a drug by age 13, and 20.5% by age 15.

Of seniors who had initiated use of marijuana, 10.4% had started use at home, 39.8% at a friend's home, and 49.8% elsewhere. During the past year, 4.1% of all high school students said that they used marijuana at home, 10.1% at a friend's house, and 6.7% in a car. In the past year, 7.3% of all high school students who drive and 10.0% of seniors who drive said that they had driven after using drugs . Furthermore, 6.2% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 27.7% of 8th graders who had an opinion said it is easy to get marijuana and 14.9% said it is easy to get cocaine or crack; 73.1% of seniors who had an opinion said it is easy to get marijuana and 48.6% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 22.7% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 684 individual juvenile offenders in the county were referred to the Solicitor; of these, 10.4% were age 12 or younger, 31.0% were 13 or 14, and 58.6% were 15 or older.

Of the referrals to the family court, 12.6% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 85 juvenile cases constituting 10.0% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

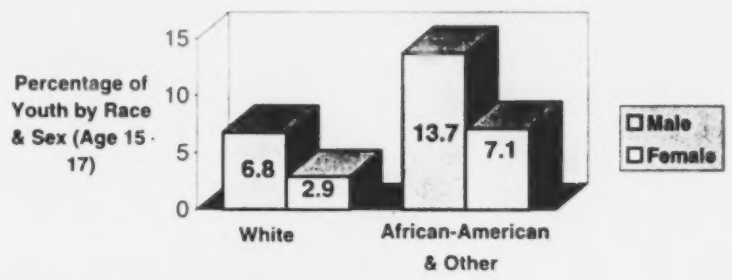
Delinquents are likely to live in families with low income: 35.3% lived in families with income under $10,000, 32.8% with $10,000-$19,999 and 31.9% with $20,000 or more. Furthermore, only 25.1% of delinquents lived with both natural parents, while 50.5% lived in a single parent household and 24.4% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 32.8% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 32.6% had at least one prior referral and 11.7% had been referred to court 3 times or more.

In 1994-95, there were 24 juvenile commitments from the county to State institutions.

During 1994-95, 400 youth ages 15 to 17 were referred to the family courts. In the county, 6.1% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.

Figure 13: Court Referrals



Deaths: During 1990-94, 54 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 30 deaths between 1990 and 1994; homicides killed 7 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 21.6% of children in single-parent families, 15.7% in poverty, 24.7% dropping out of school, 37.4% of high school students using alcohol and 22.7% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

Dr. A. Baron Holmes (803-734-2291) E-mail bholmes@ogc.state.sc.us

-or-

SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

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SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

ANDERSON

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	148	7.4	7.3	1.01	16	1994
Births to Mothers Not Completing High School	463	23.2	21.8	1.06	18	1994
Births to Single Mothers	364	18.2	30.4	0.60	4	1994
Children in Single-Parent Families	6,929	21.6	25.1	0.86	7	1990
Parents Working	12,604	77.3	74.3	1.04	34	1990
Abuse & Neglect Victims	353	0.9	1.0	0.90	16	1995-96
Separation from Parents	1,587	4.4	5.1	0.86	10	1990
Economic Status						
Poor Children	5,610	15.7	21.0	0.75	7	1989
Mean Income of Families with Children	$37,133	NA	NA	1.04	8	1989
Health						
Less than Adequate Prenatal Care	560	28.0	32.0	0.88	13	1994
Low Birth Weight	164	8.2	9.2	0.89	10	1994
Not Adequately Immunized	235	17.0	18.0	0.94	30	1995
Cigarette Smokers (High School)	1,734	27.5	23.1	1.19	40	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	560	24.5	28.1	0.87	10	1994-95
1st Grade Failures	158	7.3	6.8	1.07	23	1994-95
Failures grades 1-3 (approx. %)	221	10.5	11.3	0.93	16	1994-95
Overage for Grade 3	290	15.2	16.2	0.94	18	1995-96
Special Education (ages 8 and 9)	650	16.6	15.3	1.08	30	1995-96
School Achievement						
Special Education Grades 1 - 12	2,941	12.6	13.0	0.97	14	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	371	20.2	27.9	0.72	4	1995-96
Grade 8 BSAP - Math (Below standards)	532	26.8	34.8	0.77	6	1995-96
Grade 8 BSAP - Reading (Below standards)	442	22.2	28.8	0.77	4	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	441	21.6	29.5	0.73	4	1995-96
Exit Exam (Not passing all parts on 1st attempt)	448	26.9	35.3	0.76	3	1995-96
Dropout Rate	1,974	24.7	27.3	0.90	15	1992-95
25-34 Year olds with no HS Degree or GED	4,681	20.7	19.1	1.08	12	1990
Adolescent Risk Behavior						
Not in School or Employed	899	10.1	9.6	1.05	20	1990
Pregnancy (Ages 14 - 17)	197	4.6	4.8	0.96	14	1994
Alcohol Use (High School)	2,358	37.4	37.4	1.00	28	1992-93
Drug Use (High School)	883	14.0	12.8	1.09	37	1992-93
Binge Drinking (5 or more drinks)	1,198	19.0	16.3	1.17	39	1992-93
Delinquency (ages 15 - 17)	400	6.1	6.4	0.95	23	1994-95

* 1 = "best" 46 = "worst"

ANDERSON TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	170	8.2	1.24	1992	169	8.6	1.30	1993	148	7.4	1.01	1994
Births to Mothers Not Completing High School	589	28.6	1.21	1992	525	26.6	1.19	1993	463	23.2	1.06	1994
Births to Single Mothers	415	20.1	0.66	1992	363	18.4	0.61	1993	364	18.2	0.60	1994
Children in Single-Parent Families		10.2	0.70	1970		15.5	0.82	1980	6,929	21.6	0.86	1990
Economic Status												
Poor Children		17.3	0.60	1969		14.7	0.69	1979	5,610	15.7	0.75	1989
Mean Income of Families with Children					34,034	N/A	0.97	1979	37,133	N/A	0.96	1989
Health												
Less than Adequate Prenatal Care	479	23.2	0.59	1992	353	17.9	0.51	1993	560	28.0	0.88	1994
Low Birth Weight	168	8.1	0.90	1992	163	8.3	0.89	1993	164	8.2	0.89	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	448	21.5	0.81	1990-91	545	26.3	0.95	1992-93	560	24.5	0.87	1994-95
1st Grade Failures	147	7.2	0.80	1991-92	126	7.0	0.72	1992-93	158	7.3	1.07	1994-95
Failures Grades 1-3 (approx. %)	200	10.0	0.71	1991-92	171	9.7	0.68	1992-93	221	10.5	0.93	1994-95
Overage for Grade 3	479	24.7	0.95	1991-92	360	18.5	0.90	1993-94	290	15.2	0.94	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	269	14.6	0.76	1991-92	258	14.6	0.74	1993-94	371	20.2	0.72	1995-96*
Grade 8 BSAP - Math (Below Standards)	452	22.5	0.83	1991-92	496	24.1	0.78	1993-94	532	26.8	0.77	1995-96
Grade 8 BSAP - Reading (Below Standards)	409	20.4	0.84	1991-92	490	23.8	0.83	1993-94	442	22.2	0.77	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	418	19.7	0.90	1991-92	383	18.7	0.77	1993-94	441	21.6	0.73	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	412	26.8	0.86	1991-92	468	27.4	0.84	1993-94	448	26.9	0.76	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	200	4.8	1.02	1992	212	5.1	1.13	1993	197	4.6	0.96	1994
Alcohol Use (High School)	2,469	39.4	0.98	1989-90					2,358	37.4	1.00	1992-93
Drug Use (High School)	969	15.5	1.16	1989-90					883	14.0	1.09	1992-93
Binge Drinking (5 or more drinks)		18.3	1.17	1989-90					1,198	19.0	1.17	1992-93

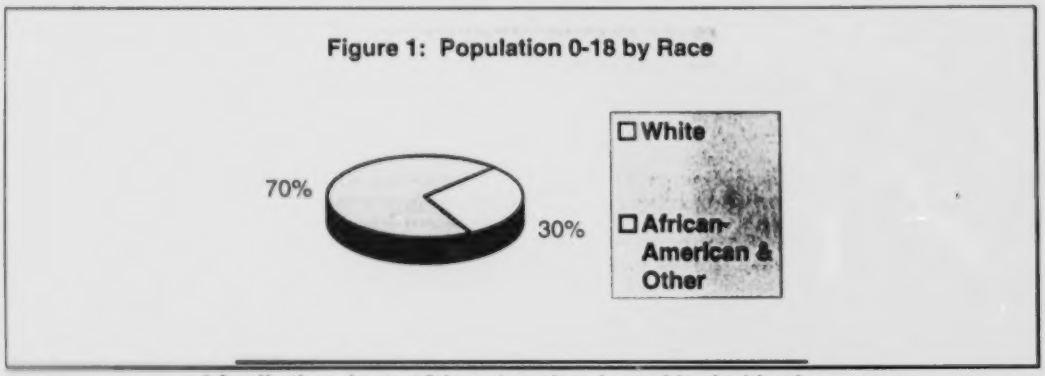
SOUTH CAROLINA kids count

1996 Report BAMBERG

DEMOGRAPHICS

In 1994, there were 4,960 children under age 18 in the county. Of these, 1,470 were White and 3,490 were African-American and Other races. There were 5,770 children under age 18 in 1980, 6,181 in 1970, and 7,167 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 29.7% of the population in 1994, down from 44.0% in 1960, 38.8% in 1970 and 31.8% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 35.3% of all households in 1990, as compared with 45.0% of households in 1960, had children below the age of 18.

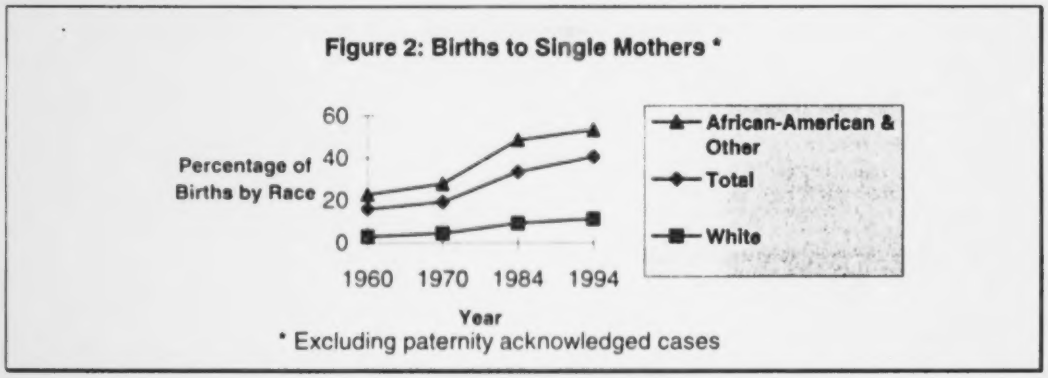
Births to Teen Mothers: In 1994, 18 babies were born to mothers younger than age 18. These babies were 7.6% of all children born in the county; 5.6% of all White babies and 8.5% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 94.4% were born to single mothers.

In 1994, 43 babies were born to mothers younger than age 20. These babies were 18.2% of all children born in the county; 14.1% of all White babies and 20.0% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 76.7% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 61 babies, 25.8% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 60.0% in 1970.

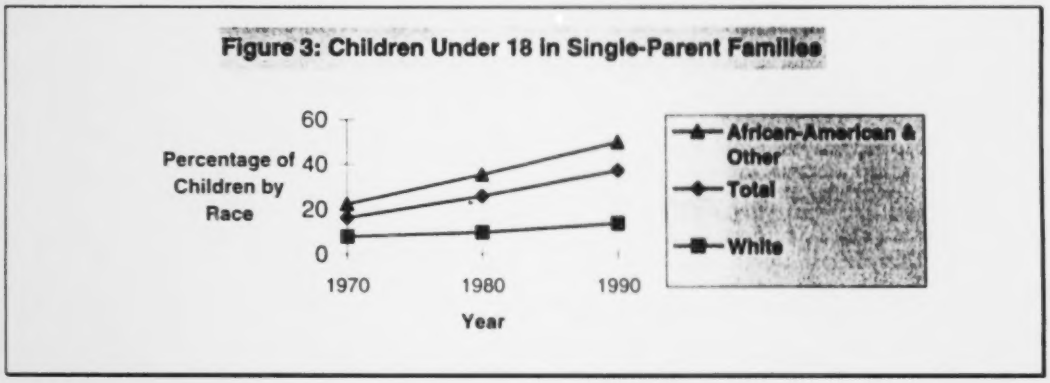
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 96 babies, 40.7% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 33.6% and in 1960 it was 15.9%. In 1994, 11.3% of White children and 53.3% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 24 babies, 10.2% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 120, constituting 50.8% of all babies, 19.7% of White babies, and 64.2% of African-American and Others.



Divorce Rate: In 1994, 128 marriage licenses were issued, while 50 divorce decrees involving 52 children were filed. In 1970 only 23 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 1,479 children lived with only one parent. This was 37.3% of all children, up from 25.8% in 1980 and 16.2% in 1970. In 1990, 13.8% of White children and 49.9% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 61.4% of mothers with children under 6 and 74.5% with children 6 - 17 were in the labor force. This has increased substantially from 39.0% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 203 children investigated as alleged child abuse and neglect victims: 33.0% for physical abuse, 7.4% for sexual abuse, 71.9% for neglect, and 41.4% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 63 children were victims of abuse and neglect: of these 44.4% were male and 55.6% were female; 31.7% were White, and 68.3% were African-American and Other. By age, 58.7% were 0 - 5, 28.6% were 6 - 12, and 12.7% were 13 - 17. They constituted 1.3% of all children age 18 or younger; 1.4% of all Whites and 1.2% of all African-Americans and Others. In the verified cases, 30.2% of abused and neglected children lived in two parent families, 27.0% in single parent families, 20.6% with extended families, and 22.2% in other circumstances.

Family Violence: In 1994, 73 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 24.0% of all assaults, which include both simple and aggravated assaults. Overall, 49.3% of all domestic assaults involve spouse abuse (constituting 12.0% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 9.0% of all children did not live with their natural parents; of these, 309 or 6.3% of children lived with relatives, 11 or 0.2% lived with non-relatives, and 122 were in institutional facilities.

Out of Home Placements: As of September 30, 1996, 27 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 3.7% 0-2, 18.5% 3-5, 25.9% 6-10, 11.1% 11-13, and 40.7% 14 and above. The foster care population is comprised of 51.9% males and 48.1% females. Regarding their future, 25.9% were under a plan for placement in adoptive homes, 22.2% for return to a parent or guardian, 0.0% for placement with a relative, 11.1% for independent living, 40.7% for permanent foster care, and 0.0% for other circumstances.

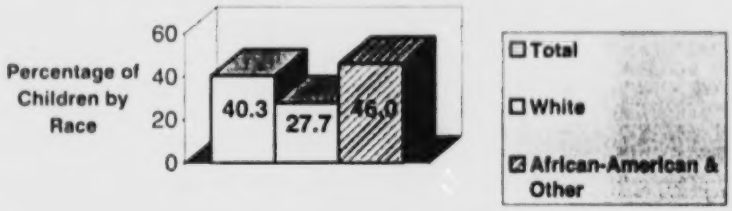
Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.37 adults for every person below age 18. This was up substantially from 1960, when there were only 1.27 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 1,988 children and youth under the age of 18 lived in families with incomes below poverty. Over 40.3% of all children and youth lived below poverty: 27.7% of Whites and 46.0% of African-Americans and others.

Figure 4: Children Living in Poverty



Poverty has always been a serious problem. While the rate among children under age 18 was 40.3% in 1989, it was 35.4% in 1979 and 39.8% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 41.2% of children 0 - 5 and 40.0% of children 6 - 17 lived in poverty; 26.1% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 73.1% of children in single-parent families lived in poverty, but only 15.8% of children in married-couple families were poor. Children in single-parent families made up 71.5% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 2,604 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 616 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	4,927	1,988	2,604	3,000	3,238	3,371	3,495
Percent		40.3%	52.9%	60.9%	65.7%	68.4%	70.9%
White	1,518	420	505	541	627	627	699
Percent		27.7%	33.3%	35.6%	41.3%	41.3%	46.0%
African-American and Other	3,409	1,568	2,099	2,459	2,611	2,744	2,796
Percent		46.0%	61.6%	72.1%	76.6%	80.5%	82.0%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 21.6% of households did not have a car; 8.3% of Whites and 32.8% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 19.1% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 42.1% of households had no phone.

Income: The mean income of families with children in 1989 was $29,863; in 1979, it had been $29,060, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 9.8%.

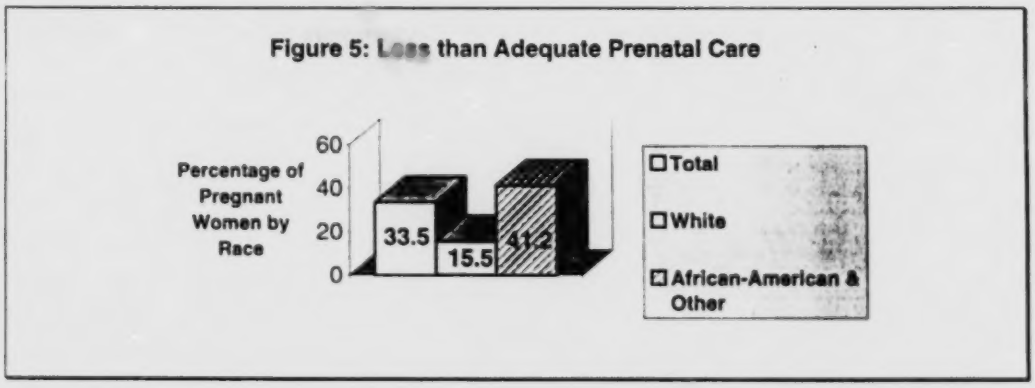
The mean income of single-parent families with children was $9,266 in 1989, as compared with $39,708 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 530 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 46.2% had child support court orders. The average monthly payment of child support was $154.10, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 114 parents in non-AFDC families were obligated to pay a monthly average of $143.59. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 70 or 29.7% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 79 or 33.5% of pregnant women received less than adequate prenatal care: 11 or 15.5% of Whites and 68 or 41.2% of African-Americans and Others. In that same year, 5 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 22 or 9.3% of all babies in the county were born with low birthweight. Over 13.3% of African-American babies and 0.0% of White babies were born with low birthweight. During 1992-94, approximately 20 or 2.7% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 24.9%. For Whites, the rate decreased by 32.8%, while for African-Americans and Others, the rate decreased by 26.0%. Over the three-year period 1992-94, 1 White and 7 African-American and Other infants died before age one. By comparison, 2 White and 11 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 0 White and 4 African-American and Other children ages 1-14 died in the county. During 1982-84, 0 White and 4 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 43.2% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 4.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 229 to 344 youth ages 13-19 in the county were infected with a STD. In the county, there was 1 reported case of children under age 15 and 9 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 8.4% first smoked by age 11, 17.2% by age 13, and 27.0% by age 15. In a typical month, 16.0% of 7th and 8th graders and 13.0% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 37.3% of White 7th to 12th graders used cigarettes, in comparison with 5.5% African-Americans. A smaller but significant group of high school students (6.2%) used smokeless tobacco monthly; it was used primarily by White males (38.8%) compared with 1.3% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 496 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 113 students in grades 1-12 with learning disabilities and 312 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 343 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 734 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 4 nurses; 2 are currently available.

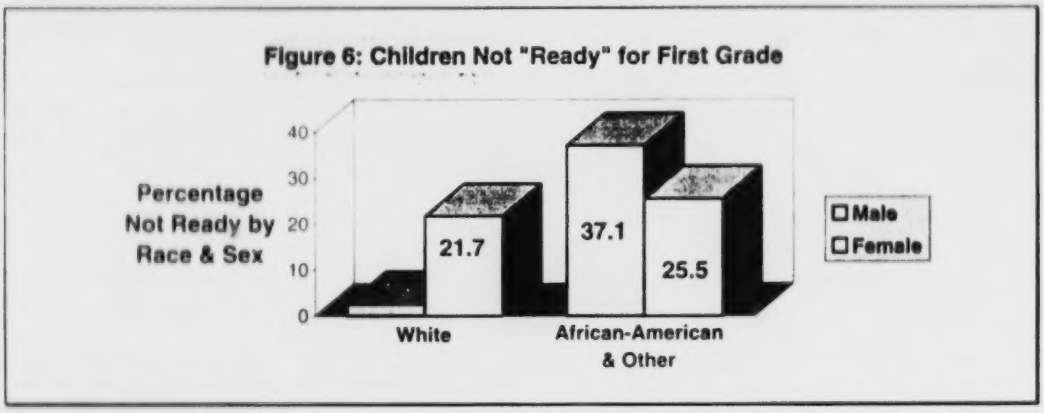
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 35.3% for Whites and 39.3% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

77 children not ready — **26.8% children not ready**

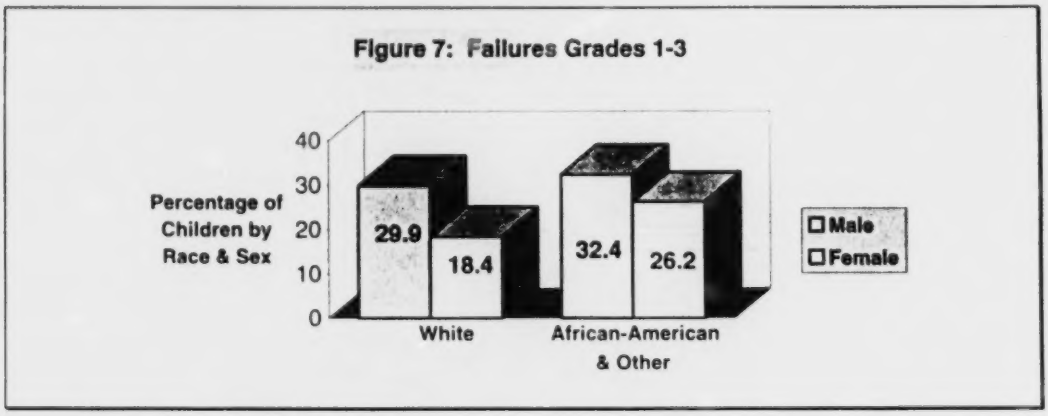


1st Grade Failures in 1995:

42 children failing — **14.4% children failing**

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

75 children failing — **27.7% children failing**



Overage for Grade 3 in 1996:

37 children overage	17.5% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 105 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 22.0% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 26.8% assessed not ready for the 1st grade, 17.5% overage in grade 3, and 22.0% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

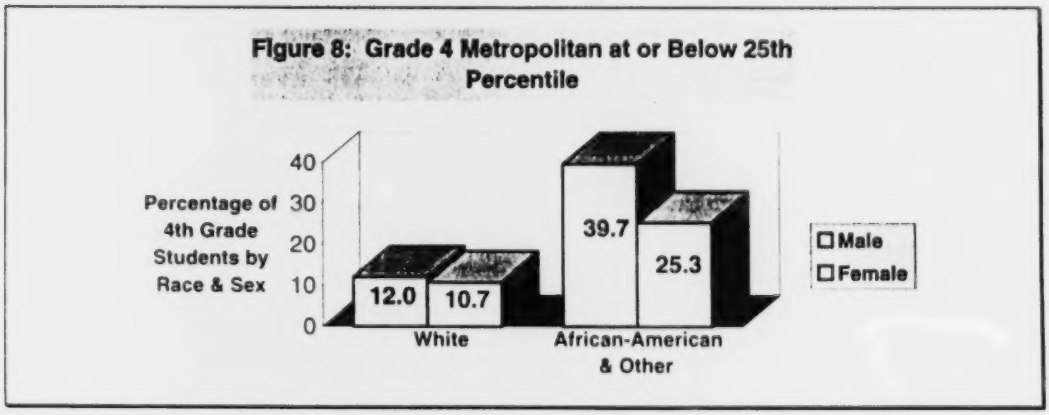
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 312 speech and language impaired, 113 learning disabled, 7 emotionally disabled, 109 mentally impaired, and 16 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 19.8% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

53 children at or below 25th percentile	26.5% children at or below 25th percentile



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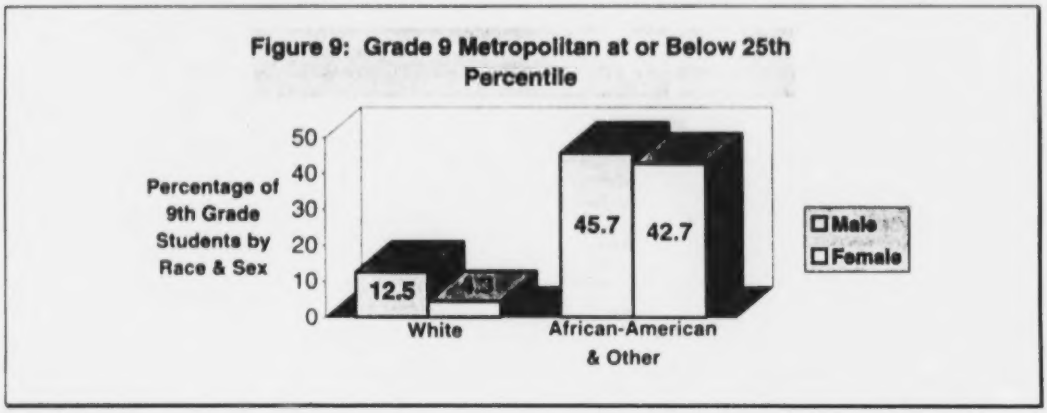
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	68	32.5	64	30.8
White Males	5	13.5	8	21.6
White Females	1	3.6	3	10.7
African-American & Other Males	30	41.1	28	38.9
African-American & Other Females	32	45.1	25	35.2

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

87 students at or below 25th percentile

36.3% students at or below 25th percentile

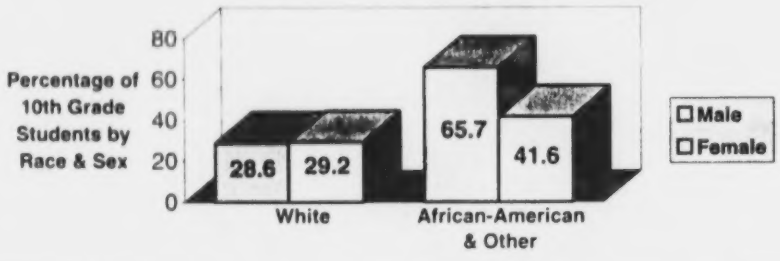


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

89 students not passing all parts

47.1% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



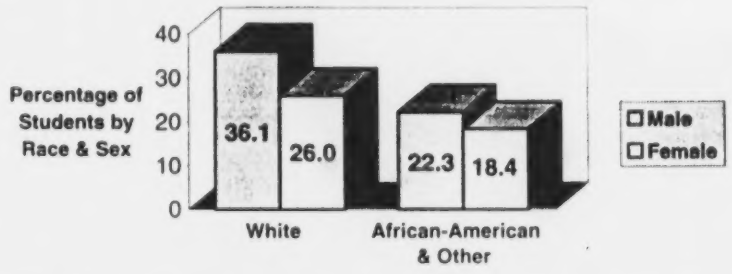
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 70.3% to 32.5% in math and from 53.4% to 27.5% in reading. During the 1990s the trend altered, with 32.5% not meeting 8th grade math standards in 1996 and 30.8% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 43.4% in 1983 on the CTBS, 50.2% in 1990 on the Stanford, and 39.7% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 38.8% in 1990 and 39.2% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

239 students drop out

23.4% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 26.4% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 26.5% during 1985-89, and 27.1% during 1990-94. During the 1995-96 period, 89.8% of all who did graduate received the State High School Diploma, while 9.0% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 1.2% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 2 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 55 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 25.7% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 23.4% to 47.1%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 181 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 11.4% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

13.0%	White Males	13.5%	African-American & Other Males
11.2%	White Females	8.9%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 17 girls between the ages of 14 and 17 became pregnant in 1993 and 26 in 1994. In 1994, this represented 3.9% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 3.8% for Whites and 3.9% for African-Americans and others. Of all pregnancies to 14-17 year olds, 69.2% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 27.2%.

Alcohol Use: In 1992-93, 22.2% of 7th and 8th graders and 34.8% of high schoolers said they had used alcohol in the past month. Of White males, 51.0% had used it in the past month, compared with 32.1% of African-American males; likewise, 49.0% of White females said they had used alcohol, compared with 14.8% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 11.6% had used alcohol by age 11 or younger, 27.4% by age 13, and 49.4% by age 15.

During the previous year, 36.8% of 7th and 8th graders and 44.2% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 26.5% said they had driven after drinking, and 12.7% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 52.0% of eighth graders and 82.6% of seniors felt that beer was easy to get; 48.1% of eighth graders and 46.5% of seniors felt there was not a great risk in using it regularly.

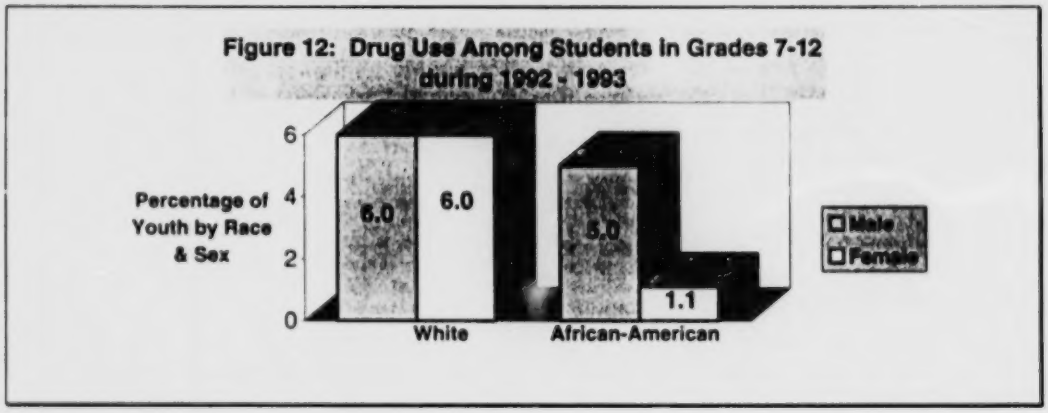
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 22.4% of all high school students in 1992-93 responded 3 or more drinks at a time; 13.4% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 3.7% of 7th and 8th graders and 3.7% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (6.0%) and White females (6.0%); use among African-American males was 5.0%; African-American females, 1.1%. Some young people first used drugs at an early age: among students 15 and older, 2.1% experienced their first use by age 11 or sooner; 3.3% had used a drug by age 13, and 6.0% by age 15.

Of seniors who had initiated use of marijuana, 10.3% had started use at home, 60.3% at a friend's home, and 29.3% elsewhere. During the past year, 9.0% of all high school students said that they used marijuana at home, 1.5% at a friend's house, and 1.5% in a car. In the past year, 2.2% of all high school students who drive and 1.1% of seniors who drive said that they had driven after using drugs . Furthermore, 1.1% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 25.8% of 8th graders who had an opinion said it is easy to get marijuana and 23.7% said it is easy to get cocaine or crack; 61.0% of seniors who had an opinion said it is easy to get marijuana and 60.7% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 6.0% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 97 individual juvenile offenders in the county were referred to the Solicitor; of these, 21.6% were age 12 or younger, 32.0% were 13 or 14, and 46.4% were 15 or older.

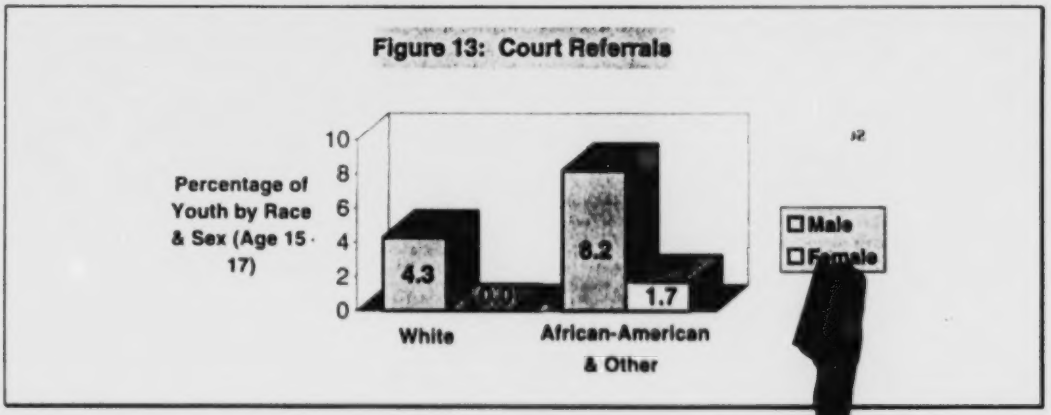
Of the referrals to the family court, 20.9% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 0 juvenile cases constituting 0.0% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 48.8% lived in families with income under $10,000, 41.5% with $10,000-$19,999 and 9.8% with $20,000 or more. Furthermore, only 24.4% of delinquents lived with both natural parents, while 44.4% lived in a single parent household and 31.1% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 48.9% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 27.8% had at least one prior referral and 17.5% had been referred to court 3 times or more.

In 1994-95, there were 5 juvenile commitments from the county to State institutions.

During 1994-95, 45 youth ages 15 to 17 were referred to the family courts. In the county, 4.2% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 5 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 3 deaths between 1990 and 1994; homicides killed 0 youth 15 to 19 years-old during the five year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 37.3% of children in single-parent families, 40.3% in poverty, 23.4% dropping out of school, 34.8% of high school students using alcohol and 6.0% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

BAMBERG

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	18	7.6	7.3	1.04	17	1994
Births to Mothers Not Completing High School	61	25.8	21.8	1.18	26	1994
Births to Single Mothers	96	40.7	30.4	1.34	29	1994
Children in Single-Parent Families	1,479	37.3	25.1	1.49	45	1990
Parents Working	1,165	70.6	74.3	0.95	6	1990
Abuse & Neglect Victims	63	1.3	1.0	1.30	34	1995-96
Separation from Parents	442	9.0	5.1	1.76	45	1990
Economic Status						
Poor Children	1,988	40.3	21.0	1.92	45	1989
Mean Income of Families with Children	$29,863	NA	NA	0.84	30	1989
Health						
Less than Adequate Prenatal Care	79	33.5	32.0	1.05	25	1994
Low Birth Weight	22	9.3	9.2	1.01	21	1994
Not Adequately Immunized	14	4.0	18.0	0.22	1	1995
Cigarette Smokers (High School)	97	13.0	23.1	0.56	6	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	77	26.8	28.1	0.95	17	1994-95
1st Grade Failures	42	14.4	6.8	2.12	40	1994-95
Failures grades 1-3 (approx. %)	75	27.7	11.3	2.45	41	1994-95
Overage for Grade 3	37	17.5	16.2	1.08	26	1995-96
Special Education (ages 8 and 9)	105	22.0	15.3	1.44	46	1995-96
School Achievement						
Special Education Grades 1 - 12	557	19.8	13.0	1.52	46	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	53	26.5	27.9	0.95	18	1995-96
Grade 8 BSAP - Math (Below standards)	68	32.5	34.8	0.93	15	1995-96
Grade 8 BSAP - Reading (Below standards)	64	30.8	28.8	1.07	23	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	87	36.3	29.5	1.23	29	1995-96
Exit Exam (Not passing all parts on 1st attempt)	89	47.1	35.3	1.33	34	1995-96
Dropout Rate	239	23.4	27.3	0.86	8	1992-95
25-34 Year olds with no HS Degree or GED	576	25.7	19.1	1.35	28	1990
Adolescent Risk Behavior						
Not in School or Employed	181	11.4	9.6	1.19	29	1990
Pregnancy (Ages 14 - 17)	26	3.9	4.8	0.81	6	1994
Alcohol Use (High School)	260	34.8	37.4	0.93	16	1992-93
Drug Use (High School)	28	3.7	12.8	0.29	3	1992-93
Binge Drinking (5 or more drinks)	100	13.4	16.3	0.82	16	1992-93
Delinquency (ages 15 - 17)	45	4.2	6.4	0.66	5	1994-95

* 1 = "best" 46 = "worst"

BAMBERG TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	27	10.2	1.55	1992	12	5.1	0.77	1993	18	7.6	1.04	1994
Births to Mothers Not Completing High School	79	29.7	1.26	1992	46	19.6	0.88	1993	61	25.8	1.18	1994
Births to Single Mothers	117	44.0	1.45	1992	101	43.0	1.42	1993	96	40.7	1.34	1994
Children in Single-Parent Families		16.2	1.12	1970		25.8	1.37	1980	1,479	37.3	1.49	1990
Economic Status												
Poor Children		39.8	1.39	1969		35.4	1.67	1979	1,988	40.3	1.92	1989
Mean Income of Families with Children					29,060	N/A	1.14	1979	29,863	N/A	1.19	1989
Health												
Less than Adequate Prenatal Care	137	51.5	1.30	1992	101	43.0	1.22	1993	79	33.5	1.05	1994
Low Birth Weight	23	8.6	0.96	1992	25	10.6	1.14	1993	22	9.3	1.01	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	81	30.6	1.15	1990-91	69	26.2	0.94	1992-93	77	26.8	0.95	1994-95
1st Grade Failures	34	13.0	1.44	1991-92	34	14.4	1.48	1992-93	42	14.4	2.12	1994-95
Failures Grades 1-3 (approx. %)	63	23.4	1.66	1991-92	49	20.3	1.42	1992-93	75	27.7	2.45	1994-95
Overage for Grade 3	94	31.5	1.22	1991-92	58	25.9	1.26	1993-94	37	17.5	1.08	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	58	25.1	1.30	1991-92	62	25.4	1.28	1993-94	53	26.5	0.95	1995-96*
Grade 8 BSAP - Math (Below Standards)	63	29.2	1.08	1991-92	81	40.3	1.30	1993-94	68	32.5	0.93	1995-96
Grade 8 BSAP - Reading (Below Standards)	59	27.3	1.12	1991-92	75	37.1	1.29	1993-94	64	30.8	1.07	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	43	21.6	0.99	1991-92	60	27.4	1.13	1993-94	87	36.3	1.23	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	68	33.3	1.07	1991-92	65	33.7	1.03	1993-94	89	47.1	1.33	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	29	4.3	0.91	1992	17	2.5	0.56	1993	26	3.9	0.81	1994
Alcohol Use (High School)	222	24.7	0.61	1989-90					260	34.8	0.93	1992-93
Drug Use (High School)	47	5.2	0.39	1989-90					28	3.7	0.29	1992-93
Binge Drinking (5 or more drinks)		8.0	0.51	1989-90					100	13.4	0.82	1992-93

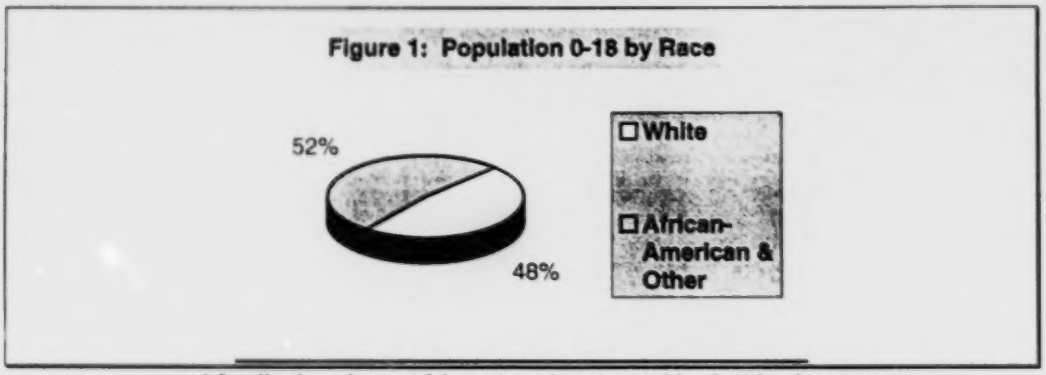
SOUTH CAROLINA kids count

1996 Report BARNWELL

DEMOGRAPHICS

In 1994, there were 6,430 children under age 18 in the county. Of these, 3,070 were White and 3,350 were African-American and Other races. There were 6,712 children under age 18 in 1980, 6,747 in 1970, and 7,981 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 30.0% of the population in 1994, down from 45.2% in 1960, 39.3% in 1970 and 33.8% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 39.1% of all households in 1990, as compared with 48.0% of households in 1960, had children below the age of 18.

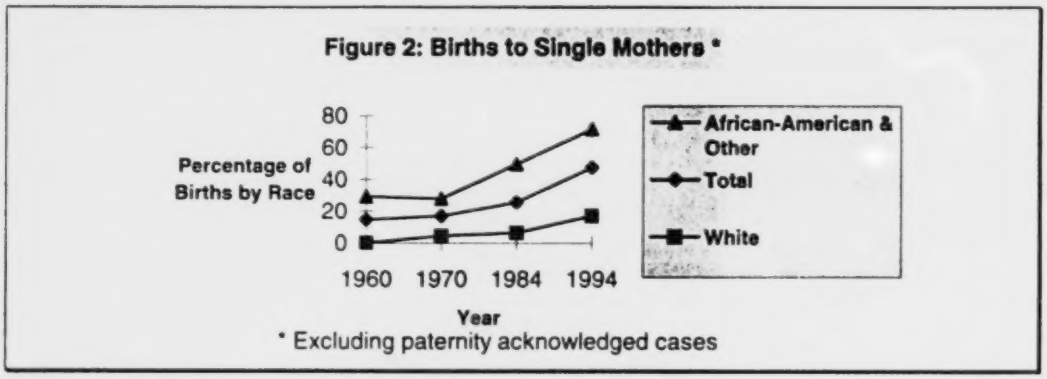
Births to Teen Mothers: In 1994, 32 babies were born to mothers younger than age 18. These babies were 9.7% of all children born in the county; 7.5% of all White babies and 11.4% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 78.1% were born to single mothers.

In 1994, 81 babies were born to mothers younger than age 20. These babies were 24.5% of all children born in the county; 19.2% of all White babies and 28.8% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 72.8% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 83 babies, 25.2% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 60.9% in 1970.

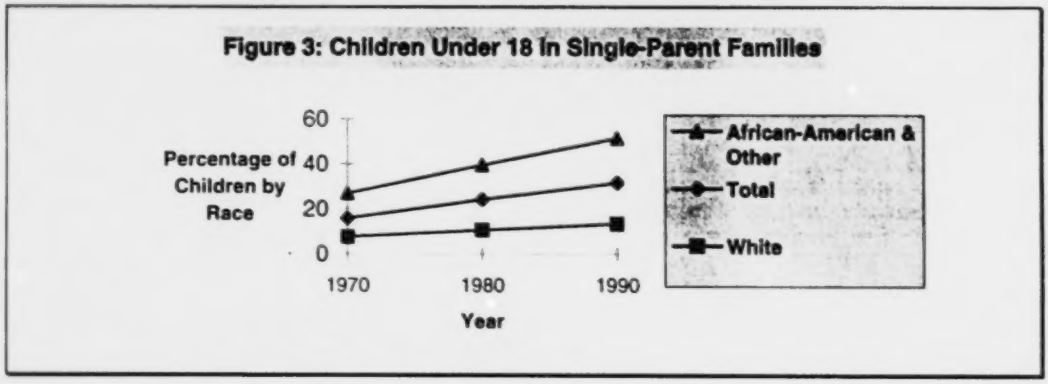
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 157 babies, 47.6% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 25.6% and in 1960 it was 14.6%. In 1994, 17.1% of White children and 71.7% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 16 babies, 4.8% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 173, constituting 52.4% of all babies, 20.5% of White babies, and 77.7% of African-American and Others.



Divorce Rate: In 1994, 164 marriage licenses were issued, while 103 divorce decrees involving 105 children were filed. In 1970 only 27 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 1,692 children lived with only one parent. This was 31.6% of all children, up from 24.2% in 1980 and 15.8% in 1970. In 1990, 13.4% of White children and 51.4% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 65.6% of mothers with children under 6 and 77.4% with children 6 - 17 were in the labor force. This has increased substantially from 44.9% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 327 children investigated as alleged child abuse and neglect victims: 31.5% for physical abuse, 15.9% for sexual abuse, 62.4% for neglect, and 40.1% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 100 children were victims of abuse and neglect: of these 48.0% were male and 52.0% were female; 36.5% were White, and 63.5% were African-American and Other. By age, 32.0% were 0 - 5, 42.0% were 6 - 12, and 26.0% were 13 - 17. They constituted 1.5% of all children age 18 or younger; 1.1% of all Whites and 1.8% of all African-Americans and Others. In the verified cases, 23.0% of abused and neglected children lived in two parent families, 47.0% in single parent families, 4.0% with extended families, and 26.0% in other circumstances.

Family Violence: In 1994, 131 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 30.0% of all assaults, which include both simple and aggravated assaults. Overall, 56.5% of all domestic assaults involve spouse abuse (constituting 16.7% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 5.7% of all children did not live with their natural parents; of these, 286 or 4.6% of children lived with relatives, 56 or 0.9% lived with non-relatives, and 7 were in institutional facilities.

Out of Home Placements: As of September 30, 1996, 33 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 6.1% 0-2, 27.3% 3-5, 18.2% 6-10, 12.1% 11-13, and 36.4% 14 and above. The foster care population is comprised of 45.5% males and 54.5% females. Regarding their future, 0.0% were under a plan for placement in adoptive homes, 45.5% for return to a parent or guardian, 3.0% for placement with a relative, 15.2% for independent living, 36.4% for permanent foster care, and 0.0% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.33 adults for every person below age 18. This was up substantially from 1960, when there were only 1.21 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 1,864 children and youth under the age of 18 lived in families with incomes below poverty. Over 30.4% of all children and youth lived below poverty: 11.2% of Whites and 47.6% of African-Americans and others.

Figure 4: Children Living in Poverty

Poverty has always been a serious problem. While the rate among children under age 18 was 30.4% in 1989, it was 24.3% in 1979 and 32.6% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 30.9% of children 0 - 5 and 30.2% of children 6 - 17 lived in poverty; 25.1% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 65.1% of children in single-parent families lived in poverty, but only 13.2% of children in married-couple families were poor. Children in single-parent families made up 70.9% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 2,268 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 404 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	6,125	1,864	2,268	2,639	3,083	3,194	3,365
Percent		30.4%	37.0%	43.1%	50.3%	52.1%	54.9%
White	2,893	325	446	581	815	841	913
Percent		11.2%	15.4%	20.1%	28.2%	29.1%	31.6%
African-American and Other	3,232	1,539	1,822	2,058	2,268	2,353	2,452
Percent		47.6%	56.4%	63.7%	70.2%	72.8%	75.9%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 13.4% of households did not have a car; 4.6% of Whites and 27.6% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 13.7% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 30.3% of households had no phone.

Income: The mean income of families with children in 1989 was $33,166; in 1979, it had been $32,250, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 9.9%.

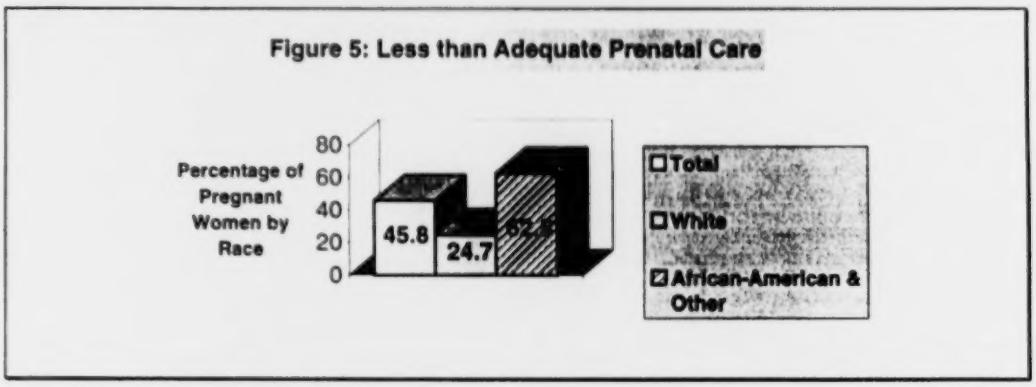
The mean income of single-parent families with children was $14,600 in 1989, as compared with $41,536 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 517 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 51.3% had child support court orders. The average monthly payment of child support was $153.96, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 141 parents in non-AFDC families were obligated to pay a monthly average of $174.80. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 85 or 25.8% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 151 or 45.8% of pregnant women received less than adequate prenatal care: 36 or 24.7% of Whites and 115 or 62.5% of African-Americans and Others. In that same year, 8 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 34 or 10.3% of all babies in the county were born with low birthweight. Over 11.4% of African-American babies and 8.9% of White babies were born with low birthweight. During 1992-94, approximately 21 or 2.0% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 40.0%. For Whites, the rate decreased by 9.3%, while for African-Americans and Others, the rate decreased by 51.2%. Over the three-year period 1992-94, 4 White and 6 African-American and Other infants died before age one. By comparison, 4 White and 11 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 1 White and 2 African-American and Other children ages 1-14 died in the county. During 1982-84, 0 White and 3 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 51.3% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 11.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 239 to 359 youth ages 13-19 in the county were infected with a STD. In the county, there were 2 reported cases of children under age 15 and 4 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 14.0% first smoked by age 11, 31.3% by age 13, and 41.1% by age 15. In a typical month, 11.5% of 7th and 8th graders and 20.9% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 31.2% of White 7th to 12th graders used cigarettes, in comparison with 4.1% African-Americans. A smaller but significant group of high school students (11.3%) used smokeless tobacco monthly; it was used primarily by White males (37.0%) compared with 1.8% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 643 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 237 students in grades 1-12 with learning disabilities and 233 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 428 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 952 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 7 nurses; 4 are currently available.

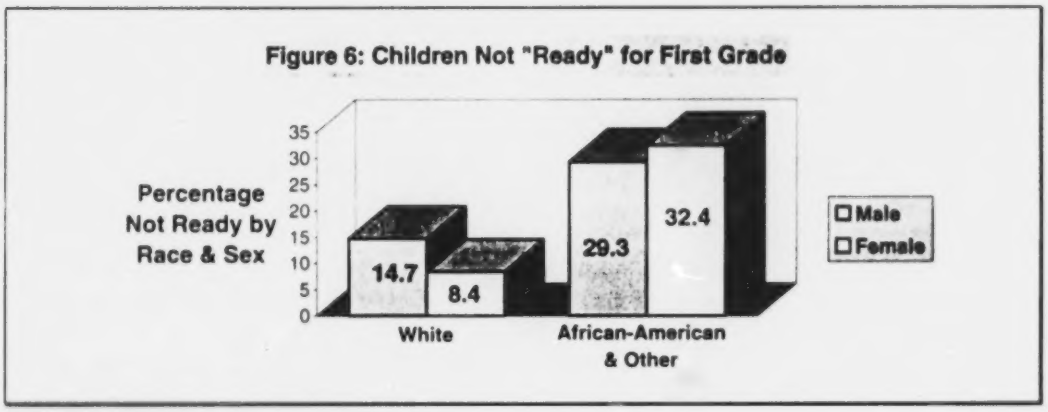
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 33.3% for Whites and 43.4% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

91 children not ready	**22.2% children not ready**

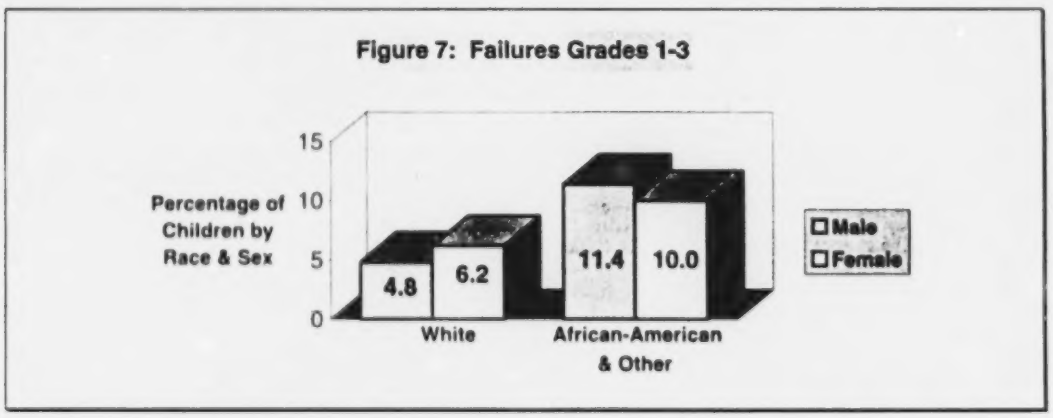


1st Grade Failures in 1995:

22 children failing	**5.2% children failing**

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

33 children failing	**8.1% children failing**



Overage for Grade 3 in 1996:

54 children overage	16.0% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 116 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 15.6% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 22.2% assessed not ready for the 1st grade, 16.0% overage in grade 3, and 15.6% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

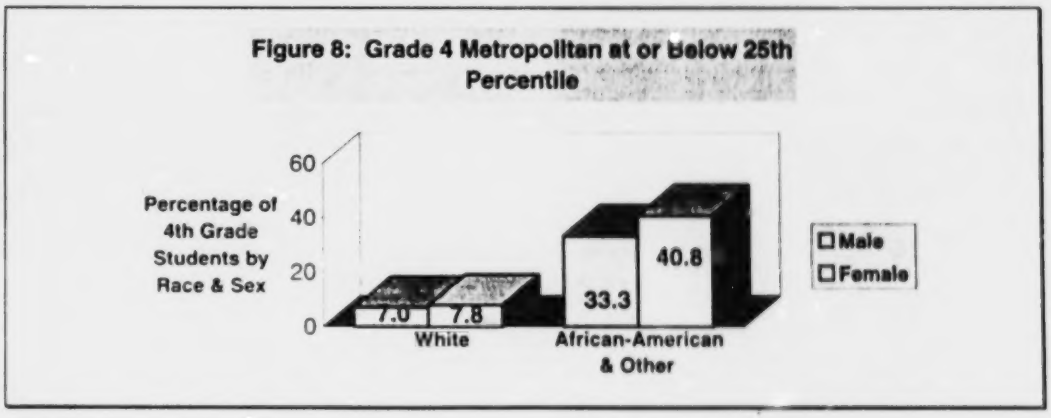
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 233 speech and language impaired, 237 learning disabled, 17 emotionally disabled, 268 mentally impaired, and 11 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 17.3% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

64 children at or below 25th percentile	21.2% children at or below 25th percentile



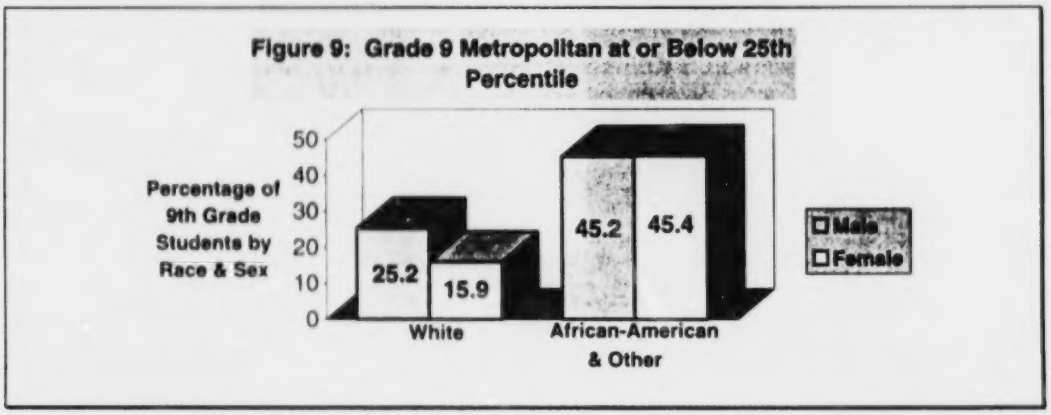
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	116	32.8	101	28.5
White Males	23	21.9	21	20.0
White Females	16	18.6	12	14.0
African-American & Other Males	38	48.1	41	51.9
African-American & Other Females	39	47.0	27	32.5

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

131 students at or below 25th percentile

32.0% students at or below 25th percentile

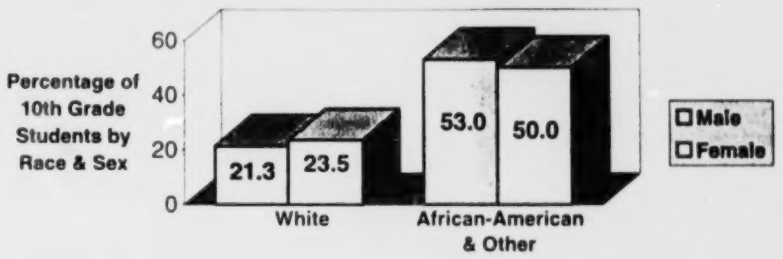


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

118 students not passing all parts

38.2% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



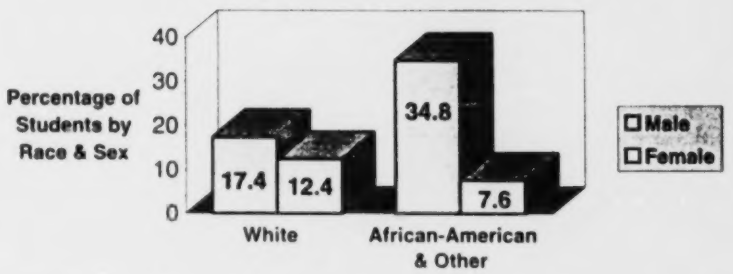
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 74.2% to 24.8% in math and from 64.3% to 21.5% in reading. During the 1990s the trend altered, with 32.8% not meeting 8th grade math standards in 1996 and 28.5% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 35.0% in 1983 on the CTBS, 32.2% in 1990 on the Stanford, and 38.6% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 37.9% in 1990 and 32.3% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

269 students drop out

18.5% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 32.8% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 27.7% during 1985-89, and 22.5% during 1990-94. During the 1995-96 period, 95.0% of all who did graduate received the State High School Diploma, while 3.4% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 1.7% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 12 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 19 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 22.2% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 18.5% to 38.2%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 152 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 12.4% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

5.7%	White Males	11.6%	African-American & Other Males
16.7%	White Females	16.9%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 45 girls between the ages of 14 and 17 became pregnant in 1993 and 45 in 1994. In 1994, this represented 6.9% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 5.0% for Whites and 8.6% for African-Americans and others. Of all pregnancies to 14-17 year olds, 71.1% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it increased by 15.9%.

Alcohol Use: In 1992-93, 19.2% of 7th and 8th graders and 39.8% of high schoolers said they had used alcohol in the past month. Of White males, 41.4% had used it in the past month, compared with 34.0% of African-American males; likewise, 37.4% of White females said they had used alcohol, compared with 19.5% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 15.4% had used alcohol by age 11 or younger, 35.2% by age 13, and 60.5% by age 15.

During the previous year, 38.5% of 7th and 8th graders and 47.1% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 35.5% said they had driven after drinking, and 18.2% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 47.8% of eighth graders and 81.1% of seniors felt that beer was easy to get; 46.8% of eighth graders and 45.5% of seniors felt there was not a great risk in using it regularly.

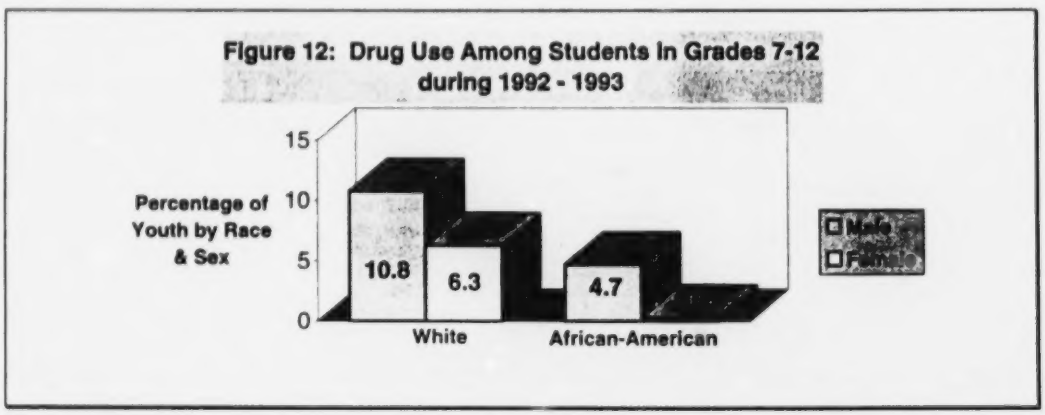
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 29.7% of all high school students in 1992-93 responded 3 or more drinks at a time; 17.0% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 3.2% of 7th and 8th graders and 6.6% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (10.8%) and White females (6.3%); use among African-American males was 4.7%; African-American females, 0.3%. Some young people first used drugs at an early age: among students 15 and older, 3.1% experienced their first use by age 11 or sooner; 6.7% had used a drug by age 13, and 13.0% by age 15.

Of seniors who had initiated use of marijuana, 14.0% had started use at home, 28.7% at a friend's home, and 57.3% elsewhere. During the past year, 1.7% of all high school students said that they used marijuana at home, 5.1% at a friend's house, and 3.8% in a car. In the past year, 5.1% of all high school students who drive and 8.4% of seniors who drive said that they had driven after using drugs . Furthermore, 5.6% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 19.3% of 8th graders who had an opinion said it is easy to get marijuana and 15.2% said it is easy to get cocaine or crack; 61.5% of seniors who had an opinion said it is easy to get marijuana and 54.8% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 10.7% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 132 individual juvenile offenders in the county were referred to the Solicitor; of these, 18.2% were age 12 or younger, 30.3% were 13 or 14, and 51.5% were 15 or older.

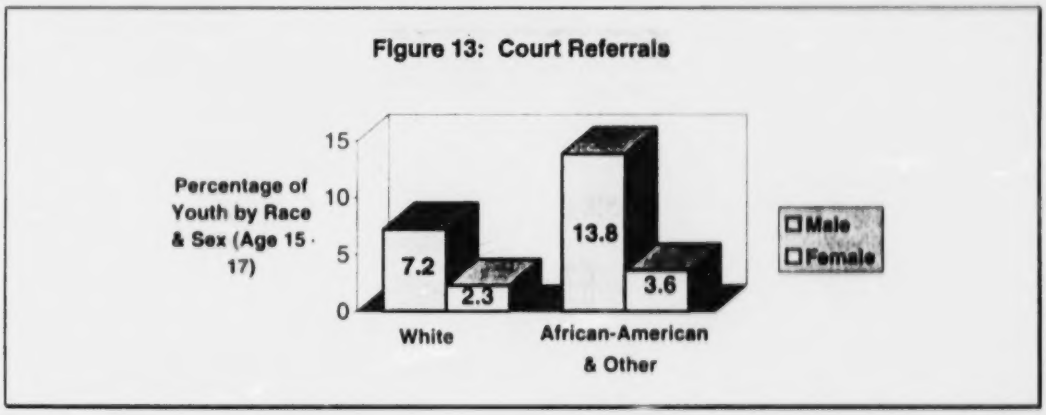
Of the referrals to the family court, 25.4% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 7 juvenile cases constituting 3.4% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 45.7% lived in families with income under $10,000, 40.0% with $10,000-$19,999 and 14.3% with $20,000 or more. Furthermore, only 15.4% of delinquents lived with both natural parents, while 56.4% lived in a single parent household and 28.2% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 46.7% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 33.3% had at least one prior referral and 15.9% had been referred to court 3 times or more.

In 1994-95, there were 6 juvenile commitments from the county to State institutions.

During 1994-95, 68 youth ages 15 to 17 were referred to the family courts. In the county, 6.9% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 8 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 2 deaths between 1990 and 1994; homicides killed 2 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 31.6% of children in single-parent families, 30.4% in poverty, 18.5% dropping out of school, 39.8% of high school students using alcohol and 10.7% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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-or-
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SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
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Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

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Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

BARNWELL

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	32	9.7	7.3	1.33	31	1994
Births to Mothers Not Completing High School	83	25.2	21.8	1.16	23	1994
Births to Single Mothers	157	47.6	30.4	1.57	41	1994
Children in Single-Parent Families	1,692	31.6	25.1	1.26	37	1990
Parents Working	1,729	73.3	74.3	0.99	16	1990
Abuse & Neglect Victims	100	1.5	1.0	1.50	37	1995-96
Separation from Parents	349	5.7	5.1	1.12	23	1990
Economic Status						
Poor Children	1,864	30.4	21.0	1.45	35	1989
Mean Income of Families with Children	$33,166	NA	NA	0.93	20	1989
Health						
Less than Adequate Prenatal Care	151	45.8	32.0	1.43	43	1994
Low Birth Weight	34	10.3	9.2	1.12	29	1994
Not Adequately Immunized	53	11.0	18.0	0.61	18	1995
Cigarette Smokers (High School)	233	20.9	23.1	0.90	22	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	91	22.2	28.1	0.79	6	1994-95
1st Grade Failures	22	5.2	6.8	0.76	14	1994-95
Failures grades 1-3 (approx. %)	33	8.1	11.3	0.72	9	1994-95
Overage for Grade 3	54	16.0	16.2	0.99	21	1995-96
Special Education (ages 8 and 9)	116	15.6	15.3	1.02	24	1995-96
School Achievement						
Special Education Grades 1 - 12	766	17.3	13.0	1.33	42	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	64	21.2	27.9	0.76	7	1995-96
Grade 8 BSAP - Math (Below standards)	116	32.8	34.8	0.94	16	1995-96
Grade 8 BSAP - Reading (Below standards)	101	28.5	28.8	0.99	15	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	131	32.0	29.5	1.08	21	1995-96
Exit Exam (Not passing all parts on 1st attempt)	118	38.2	35.3	1.08	22	1995-96
Dropout Rate	269	18.5	27.3	0.68	1	1992-95
25-34 Year olds with no HS Degree or GED	695	22.2	19.1	1.16	20	1990
Adolescent Risk Behavior						
Not in School or Employed	152	12.4	9.6	1.29	36	1990
Pregnancy (Ages 14 - 17)	45	6.9	4.8	1.44	41	1994
Alcohol Use (High School)	444	39.8	37.4	1.06	35	1992-93
Drug Use (High School)	74	6.6	12.8	0.52	10	1992-93
Binge Drinking (5 or more drinks)	190	17.0	16.3	1.04	30	1992-93
Delinquency (ages 15 - 17)	68	6.9	6.4	1.08	28	1994-95

* 1 = "best" 46 = "worst"

BARNWELL TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	36	10.1	1.53	1992	34	9.5	1.44	1993	32	9.7	1.33	1994
Births to Mothers Not Completing High School	92	25.7	1.09	1992	88	24.6	1.10	1993	83	25.2	1.16	1994
Births to Single Mothers	140	39.1	1.29	1992	151	42.3	1.40	1993	157	47.6	1.57	1994
Children in Single-Parent Families		15.8	1.09	1970		24.2	1.28	1980	1,692	31.6	1.26	1990
Economic Status												
Poor Children		32.6	1.14	1969		24.3	1.15	1979	1,864	30.4	1.45	1989
Mean Income of Families with Children					32,250	N/A	1.03	1979	33,166	N/A	1.07	1989
Health												
Less than Adequate Prenatal Care	186	52.0	1.32	1992	146	40.9	1.16	1993	151	45.8	1.43	1994
Low Birth Weight	42	11.7	1.30	1992	38	10.6	1.14	1993	34	10.3	1.12	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	116	28.2	1.06	1990-91	97	24.9	0.90	1992-93	91	22.2	0.79	1994-95
1st Grade Failures	41	10.3	1.14	1991-92	27	7.6	0.78	1992-93	22	5.2	0.76	1994-95
Failures Grades 1-3 (approx. %)	52	13.5	0.96	1991-92	34	9.8	0.69	1992-93	33	8.1	0.72	1994-95
Overage for Grade 3	68	21.4	0.83	1991-92	74	21.0	1.02	1993-94	54	16.0	0.99	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	46	13.3	0.69	1991-92	62	18.2	0.92	1993-94	64	21.2	0.76	1995-96*
Grade 8 BSAP - Math (Below Standards)	79	21.2	0.79	1991-92	106	29.9	0.97	1993-94	116	32.8	0.94	1995-96
Grade 8 BSAP - Reading (Below Standards)	91	24.6	1.01	1991-92	110	30.9	1.07	1993-94	101	28.5	0.99	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	86	21.8	1.00	1991-92	114	29.2	1.20	1993-94	131	32.0	1.08	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	99	34.5	1.11	1991-92	121	35.9	1.10	1993-94	118	38.2	1.08	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	41	6.4	1.36	1992	45	7.0	1.56	1993	45	6.9	1.44	1994
Alcohol Use (High School)	435	39.0	0.97	1989-90					444	39.8	1.06	1992-93
Drug Use (High School)	81	7.3	0.54	1989-90					74	6.6	0.52	1992-93
Binge Drinking (5 or more drinks)		13.4	0.86	1989-90					190	17.0	1.04	1992-93

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SOUTH CAROLINA kids count

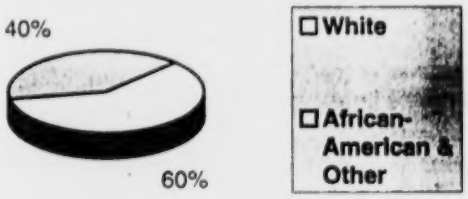
1996 Report BEAUFORT

DEMOGRAPHICS

In 1994, there were 25,900 children under age 18 in the county. Of these, 15,480 were White and 10,430 were African-American and Other races. There were 18,188 children under age 18 in 1980, 18,651 in 1970, and 19,233 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 26.7% of the population in 1994, down from 43.5% in 1960, 36.5% in 1970 and 27.8% in 1980.

Figure 1: Population 0-18 by Race



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 34.7% of all households in 1990, as compared with 52.0% of households in 1960, had children below the age of 18.

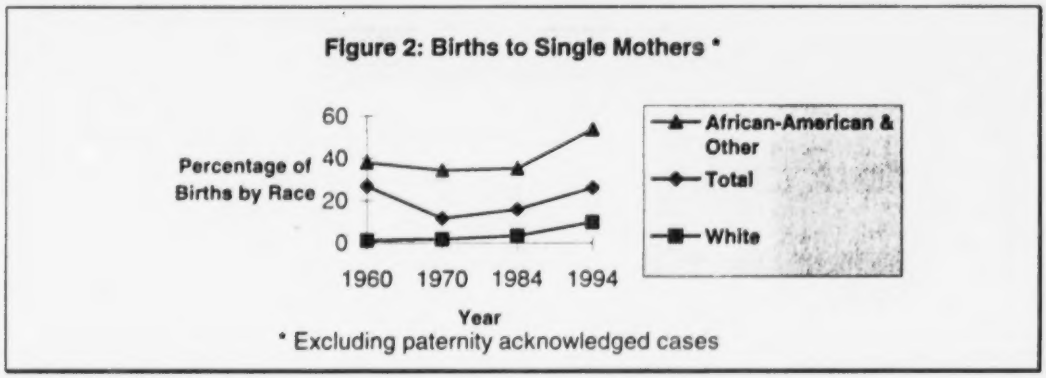
Births to Teen Mothers: In 1994, 98 babies were born to mothers younger than age 18. These babies were 6.0% of all children born in the county; 2.5% of all White babies and 11.9% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 79.6% were born to single mothers.

In 1994, 249 babies were born to mothers younger than age 20. These babies were 15.3% of all children born in the county; 10.3% of all White babies and 23.6% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 63.5% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 246 babies, 15.1% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 28.3% in 1970.

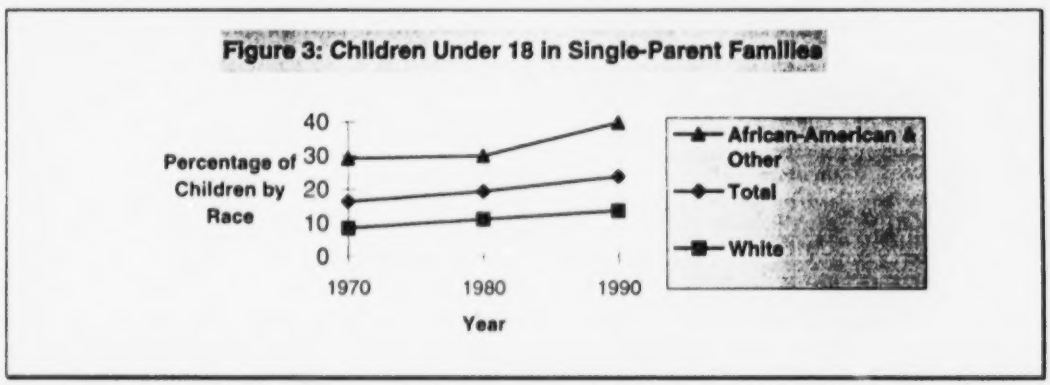
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 425 babies, 26.1% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 15.9% and in 1960 it was 26.8%. In 1994, 9.8% of White children and 53.6% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 93 babies, 5.7% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 518, constituting 31.8% of all babies, 14.4% of White babies, and 61.2% of African-American and Others.



Divorce Rate: In 1994, 1,132 marriage licenses were issued, while 436 divorce decrees involving 374 children were filed. In 1970 only 76 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 4,646 children lived with only one parent. This was 23.8% of all children, up from 19.4% in 1980 and 16.4% in 1970. In 1990, 13.7% of White children and 39.8% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 65.0% of mothers with children under 6 and 75.5% with children 6 - 17 were in the labor force. This has increased substantially from 27.9% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 629 children investigated as alleged child abuse and neglect victims: 32.3% for physical abuse, 15.7% for sexual abuse, 57.9% for neglect, and 28.1% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 121 children were victims of abuse and neglect: of these 53.0% were male and 47.0% were female; 63.2% were White, and 36.8% were African-American and Other. By age, 43.8% were 0 - 5, 38.8% were 6 - 12, and 17.4% were 13 - 17. They constituted 0.5% of all children age 18 or younger; 0.5% of all Whites and 0.4% of all African-Americans and Others. In the verified cases, 43.8% of abused and neglected children lived in two parent families, 28.1% in single parent families, 6.6% with extended families, and 21.5% in other circumstances.

Family Violence: In 1994, 972 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 30.0% of all assaults, which include both simple and aggravated assaults. Overall, 61.5% of all domestic assaults involve spouse abuse (constituting 18.2% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 5.0% of all children did not live with their natural parents; of these, 722 or 3.3% of children lived with relatives, 308 or 1.4% lived with non-relatives, and 64 were in institutional facilities.

Out of Home Placements: As of September 30, 1996, 107 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 18.7% 0-2, 15.0% 3-5, 22.4% 6-10, 14.0% 11-13, and 29.9% 14 and above. The foster care population is comprised of 54.2% males and 45.8% females. Regarding their future, 18.7% were under a plan for placement in adoptive homes, 51.4% for return to a parent or guardian, 3.7% for placement with a relative, 14.0% for independent living, 12.1% for permanent foster care, and 0.0% for other circumstances.

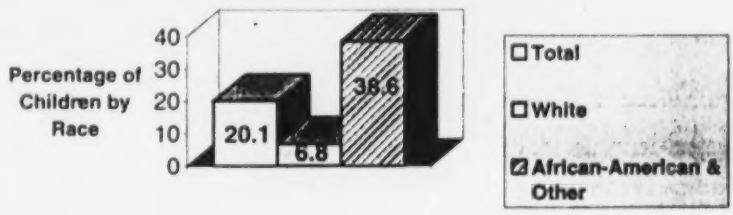
Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.75 adults for every person below age 18. This was up substantially from 1960, when there were only 1.3 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 4,315 children and youth under the age of 18 lived in families with incomes below poverty. Over 20.1% of all children and youth lived below poverty: 6.8% of Whites and 38.6% of African-Americans and others.

Figure 4: Children Living in Poverty



Poverty has always been a serious problem. While the rate among children under age 18 was 20.1% in 1989, it was 23.6% in 1979 and 35.1% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 19.3% of children 0 - 5 and 20.7% of children 6 - 17 lived in poverty; 13.8% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 54.9% of children in single-parent families lived in poverty, but only 7.5% of children in married-couple families were poor. Children in single-parent families made up 72.1% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 5,751 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 1,436 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	21,464	4,315	5,751	7,468	9,211	9,897	10,799
Percent		20.1%	26.8%	34.8%	42.9%	46.1%	50.3%
White	12,482	845	1,340	2,274	3,097	3,455	4,009
Percent		6.8%	10.7%	18.2%	24.8%	27.7%	32.1%
African-American and Other	8,982	3,470	4,411	5,194	6,114	6,442	6,790
Percent		38.6%	49.1%	57.8%	68.1%	71.7%	75.6%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 9.1% of households did not have a car; 3.2% of Whites and 25.5% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 8.0% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 13.2% of households had no phone.

Income: The mean income of families with children in 1989 was $37,807; in 1979, it had been $32,106, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 4.0%.

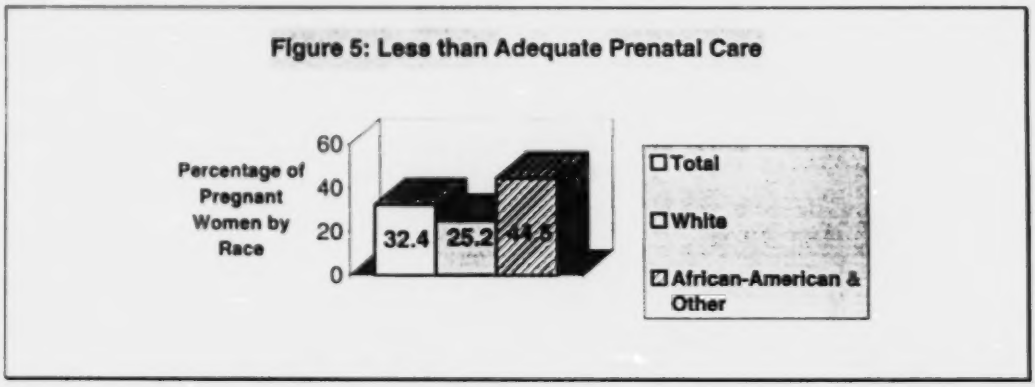
The mean income of single-parent families with children was $14,134 in 1989, as compared with $45,273 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 1,070 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 22.2% had child support court orders. The average monthly payment of child support was $142.79, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 211 parents in non-AFDC families were obligated to pay a monthly average of $221.65. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 389 or 23.9% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 528 or 32.4% of pregnant women received less than adequate prenatal care: 259 or 25.2% of Whites and 269 or 44.5% of African-Americans and Others. In that same year, 28 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 99 or 6.1% of all babies in the county were born with low birthweight. Over 7.3% of African-American babies and 5.4% of White babies were born with low birthweight. During 1992-94, approximately 64 or 1.3% of all babies were born with very low birthweight.

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Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 51.7%. For Whites, the rate decreased by 62.5%, while for African-Americans and Others, the rate decreased by 37.5%. Over the three-year period 1992-94, 18 White and 24 African-American and Other infants died before age one. By comparison, 40 White and 35 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 9 White and 18 African-American and Other children ages 1-14 died in the county. During 1982-84, 7 White and 9 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 59.4% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 13.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 996 to 1,494 youth ages 13-19 in the county were infected with a STD. In the county, there were 5 reported cases of children under age 15 and 56 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 12.2% first smoked by age 11, 26.9% by age 13, and 36.8% by age 15. In a typical month, 11.1% of 7th and 8th graders and 17.6% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 25.5% of White 7th to 12th graders used cigarettes, in comparison with 4.0% African-Americans. A smaller but significant group of high school students (3.3%) used smokeless tobacco monthly; it was used primarily by White males (10.5%) compared with 0.9% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 2,590 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 601 students in grades 1-12 with learning disabilities and 501 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 1,594 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 3,833 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 19 nurses; 15 are currently available.

Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 29.1% for Whites and 40.3% for African-Americans and Others in 1995.

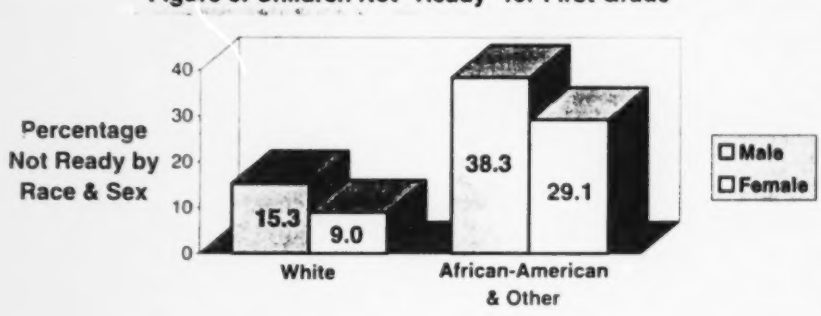
READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

276 children not ready	22.7% children not ready

Figure 6: Children Not "Ready" for First Grade



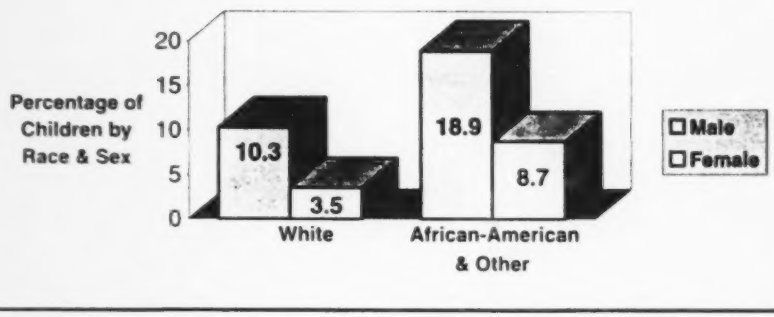
1st Grade Failures in 1995:

64 children failing	5.0% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

126 children failing	10.3% children failing

Figure 7: Failures Grades 1-3



Overage for Grade 3 in 1996:

152 children overage	14.5% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 334 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 14.5% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 22.7% assessed not ready for the 1st grade, 14.5% overage in grade 3, and 14.5% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

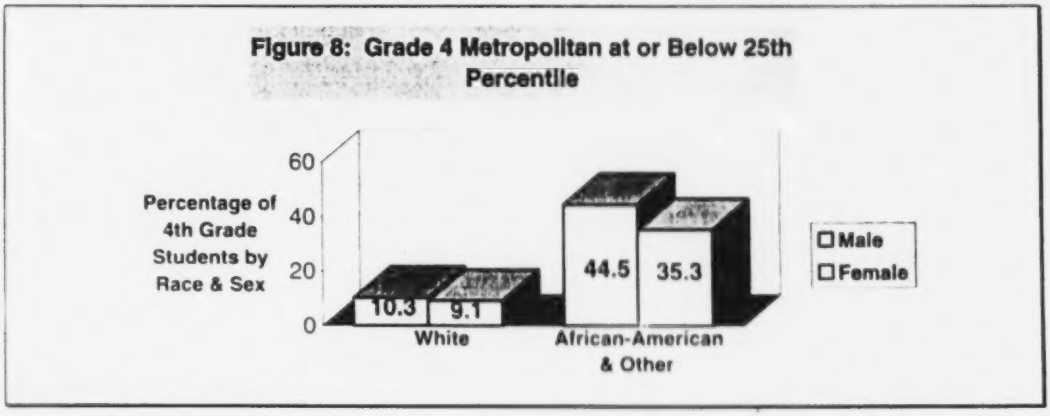
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 501 speech and language impaired, 601 learning disabled, 100 emotionally disabled, 190 mentally impaired, and 151 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 12.1% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996
(i.e. below 75% of students nationwide)

239 children at or below 25th percentile	23.4% children at or below 25th percentile



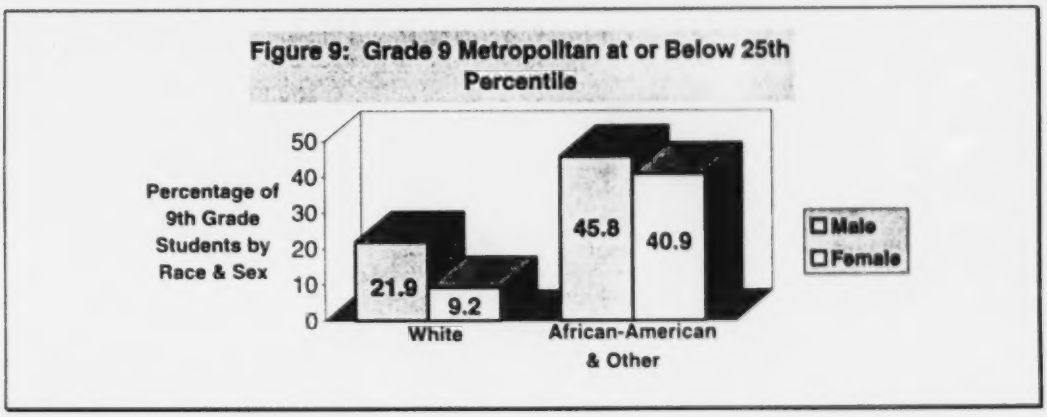
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	520	43.8	428	36.0
White Males	66	24.6	61	22.9
White Females	83	28.9	41	14.2
African-American & Other Males	186	60.6	170	55.6
African-American & Other Females	182	56.7	153	47.1

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

308 students at or below 25th percentile

29.9% students at or below 25th percentile

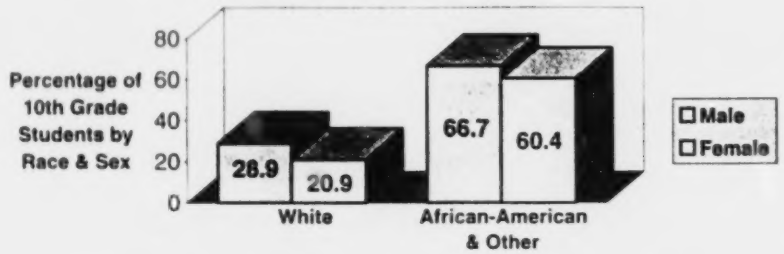


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

378 students not passing all parts

43.2% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam

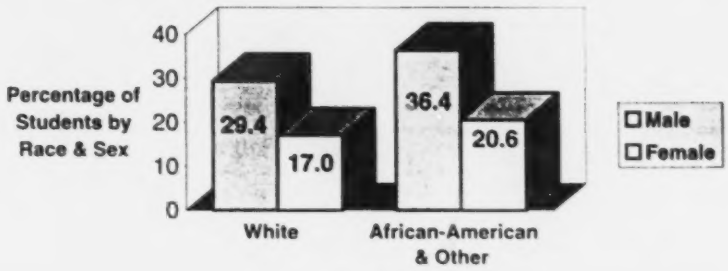


Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 63.0% to 37.3% in math and from 62.4% to 29.4% in reading. During the 1990s the trend altered, with 43.8% not meeting 8th grade math standards in 1996 and 36.0% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 34.8% in 1983 on the CTBS, 32.9% in 1990 on the Stanford, and 28.0% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 34.2% in 1990 and 30.2% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

935 students drop out	25.9% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 30.3% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 28.4% during 1985-89, and 33.2% during 1990-94. During the 1995-96 period, 94.6% of all who did graduate received the State High School Diploma, while 3.6% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 1.9% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 88 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 95 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 11.4% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 23.4% to 43.8%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 385 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 6.2% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

2.9%	White Males	4.5%	African-American & Other Males
8.4%	White Females	14.4%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 99 girls between the ages of 14 and 17 became pregnant in 1993 and 133 in 1994. In 1994, this represented 5.6% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 3.6% for Whites and 8.3% for African-Americans and others. Of all pregnancies to 14-17 year olds, 72.9% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it increased by 9.6%.

Alcohol Use: In 1992-93, 21.6% of 7th and 8th graders and 39.3% of high schoolers said they had used alcohol in the past month. Of White males, 37.8% had used it in the past month, compared with 32.9% of African-American males; likewise, 37.2% of White females said they had used alcohol, compared with 21.3% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 18.4% had used alcohol by age 11 or younger, 37.7% by age 13, and 58.9% by age 15.

During the previous year, 32.3% of 7th and 8th graders and 41.2% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 29.9% said they had driven after drinking, and 11.4% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 63.9% of eighth graders and 85.3% of seniors felt that beer was easy to get; 58.4% of eighth graders and 53.6% of seniors felt there was not a great risk in using it regularly.

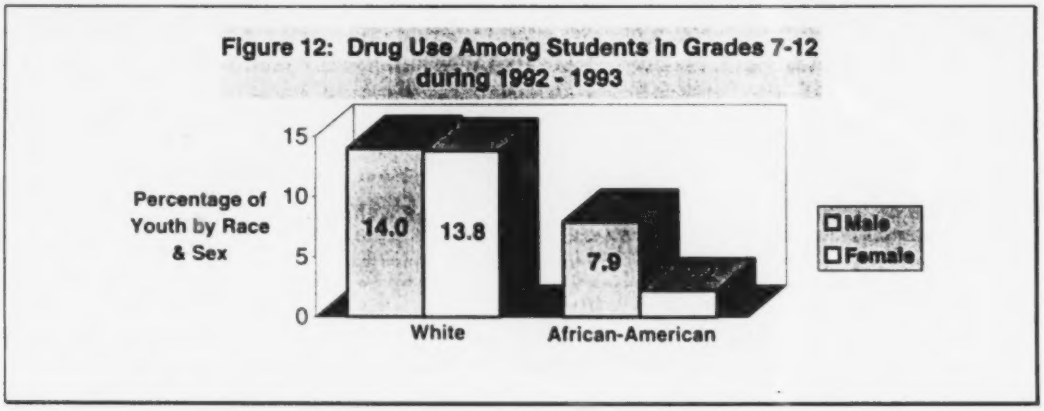
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 25.7% of all high school students in 1992-93 responded 3 or more drinks at a time; 13.7% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 3.8% of 7th and 8th graders and 13.2% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (14.0%) and White females (13.8%); use among African-American males was 7.9%; African-American females, 2.2%. Some young people first used drugs at an early age: among students 15 and older, 2.9% experienced their first use by age 11 or sooner; 8.6% had used a drug by age 13, and 17.3% by age 15.

Of seniors who had initiated use of marijuana, 11.2% had started use at home, 40.6% at a friend's home, and 48.2% elsewhere. During the past year, 3.8% of all high school students said that they used marijuana at home, 9.2% at a friend's house, and 5.9% in a car. In the past year, 7.4% of all high school students who drive and 12.1% of seniors who drive said that they had driven after using drugs . Furthermore, 7.4% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 32.3% of 8th graders who had an opinion said it is easy to get marijuana and 24.5% said it is easy to get cocaine or crack; 79.1% of seniors who had an opinion said it is easy to get marijuana and 64.2% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 21.4% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 398 individual juvenile offenders in the county were referred to the Solicitor; of these, 9.5% were age 12 or younger, 33.4% were 13 or 14, and 57.0% were 15 or older.

Of the referrals to the family court, 16.4% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 28 juvenile cases constituting 5.5% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

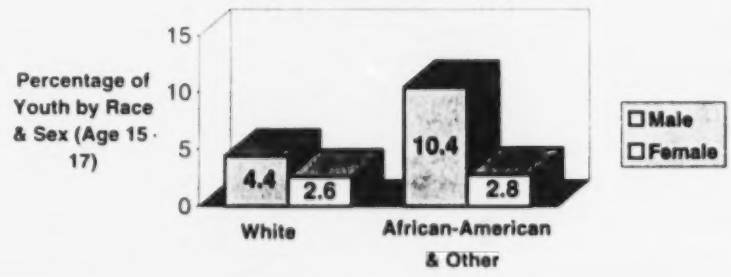
Delinquents are likely to live in families with low income: 34.4% lived in families with income under $10,000, 31.4% with $10,000-$19,999 and 34.1% with $20,000 or more. Furthermore, only 28.0% of delinquents lived with both natural parents, while 49.2% lived in a single parent household and 22.9% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 18.8% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 32.7% had at least one prior referral and 11.1% had been referred to court 3 times or more.

In 1994-95, there were 13 juvenile commitments from the county to State institutions.

During 1994-95, 226 youth ages 15 to 17 were referred to the family courts. In the county, 5.0% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.

Figure 13: Court Referrals



Deaths: During 1990-94, 23 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 7 deaths between 1990 and 1994; homicides killed 4 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 23.8% of children in single-parent families, 20.1% in poverty, 25.9% dropping out of school, 39.3% of high school students using alcohol and 21.4% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

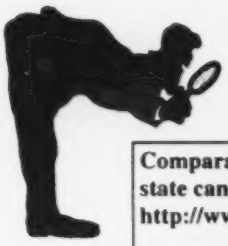
This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

Dr. A. Baron Holmes (803-734-2291) E-mail bholmes@ogc.state.sc.us
-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.



Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

BEAUFORT

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	98	6.0	7.3	0.82	7	1994
Births to Mothers Not Completing High School	246	15.1	21.8	0.69	3	1994
Births to Single Mothers	425	26.1	30.4	0.86	8	1994
Children in Single-Parent Families	4,646	23.8	25.1	0.95	12	1990
Parents Working	6,178	71.3	74.3	0.96	8	1990
Abuse & Neglect Victims	121	0.5	1.0	0.50	5	1995-96
Separation from Parents	1,094	5.0	5.1	0.98	16	1990
Economic Status						
Poor Children	4,315	20.1	21.0	0.96	16	1989
Mean Income of Families with Children	$37,807	NA	NA	1.06	6	1989
Health						
Less than Adequate Prenatal Care	528	32.4	32.0	1.01	22	1994
Low Birth Weight	99	6.1	9.2	0.66	1	1994
Not Adequately Immunized	214	13.0	18.0	0.72	22	1995
Cigarette Smokers (High School)	467	17.6	23.1	0.76	15	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	276	22.7	28.1	0.81	8	1994-95
1st Grade Failures	64	5.0	6.8	0.74	12	1994-95
Failures grades 1-3 (approx. %)	126	10.3	11.3	0.91	15	1994-95
Overage for Grade 3	152	14.5	16.2	0.90	14	1995-96
Special Education (ages 8 and 9)	334	14.5	15.3	0.95	20	1995-96
School Achievement						
Special Education Grades 1 - 12	1,543	12.1	13.0	0.93	11	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	239	23.4	27.9	0.84	10	1995-96
Grade 8 BSAP - Math (Below standards)	520	43.8	34.8	1.26	33	1995-96
Grade 8 BSAP - Reading (Below standards)	428	36.0	28.8	1.25	30	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	308	29.9	29.5	1.01	17	1995-96
Exit Exam (Not passing all parts on 1st attempt)	378	43.2	35.3	1.22	28	1995-96
Dropout Rate	935	25.9	27.3	0.95	20	1992-95
25-34 Year olds with no HS Degree or GED	1,819	11.4	19.1	0.60	1	1990
Adolescent Risk Behavior						
Not in School or Employed	385	6.2	9.6	0.65	3	1990
Pregnancy (Ages 14 - 17)	133	5.6	4.8	1.17	29	1994
Alcohol Use (High School)	1,044	39.3	37.4	1.05	34	1992-93
Drug Use (High School)	351	13.2	12.8	1.03	34	1992-93
Binge Drinking (5 or more drinks)	364	13.7	16.3	0.84	17	1992-93
Delinquency (ages 15 - 17)	226	5.0	6.4	0.78	10	1994-95

* 1 = "best" 46 = "worst"

BEAUFORT TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	92	5.3	0.80	1992	66	4.2	0.64	1993	98	6.0	0.82	1994
Births to Mothers Not Completing High School	307	17.6	0.75	1992	216	13.7	0.61	1993	246	15.1	0.69	1994
Births to Single Mothers	391	22.4	0.74	1992	354	22.5	0.74	1993	425	26.1	0.86	1994
Children in Single-Parent Families		16.4	1.13	1970		19.4	1.03	1980	4,646	23.8	0.95	1990
Economic Status												
Poor Children		35.1	1.22	1969		23.6	1.11	1979	4,315	20.1	0.96	1989
Mean Income of Families with Children					32,106	N/A	1.03	1979	37,807	N/A	0.94	1989
Health												
Less than Adequate Prenatal Care	503	28.9	0.73	1992	426	27.1	0.77	1993	528	32.4	1.01	1994
Low Birth Weight	152	8.7	0.97	1992	125	7.9	0.85	1993	99	6.1	0.66	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	251	22.2	0.83	1990-91	239	20.1	0.72	1992-93	276	22.7	0.81	1994-95
1st Grade Failures	36	3.2	0.36	1991-92	88	9.2	0.95	1992-93	64	5.0	0.74	1994-95
Failures Grades 1-3 (approx. %)	62	5.6	0.40	1991-92	132	13.9	0.97	1992-93	126	10.3	0.91	1994-95
Overage for Grade 3	283	26.6	1.02	1991-92	176	16.6	0.81	1993-94	152	14.5	0.90	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	261	24.4	1.26	1991-92	223	21.7	1.10	1993-94	239	23.4	0.84	1995-96*
Grade 8 BSAP - Math (Below Standards)	371	40.0	1.48	1991-92	431	41.1	1.33	1993-94	520	43.8	1.26	1995-96
Grade 8 BSAP - Reading (Below Standards)	318	34.3	1.41	1991-92	413	39.4	1.37	1993-94	428	36.0	1.25	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	229	23.7	1.08	1991-92	243	24.2	1.00	1993-94	308	29.9	1.01	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	273	38.7	1.24	1991-92	298	38.7	1.18	1993-94	378	43.2	1.22	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	130	5.8	1.23	1992	99	4.3	0.96	1993	133	5.6	1.17	1994
Alcohol Use (High School)	947	42.1	1.05	1989-90					1,044	39.3	1.05	1992-93
Drug Use (High School)	308	13.7	1.02	1989-90					351	13.2	1.03	1992-93
Binge Drinking (5 or more drinks)		15.1	0.97	1989-90					364	13.7	0.84	1992-93

SOUTH CAROLINA kids count

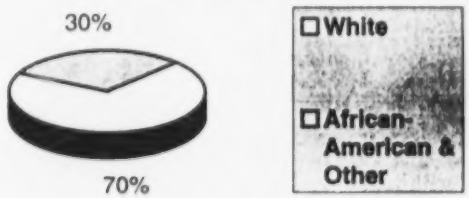
1996 Report BERKELEY

DEMOGRAPHICS

In 1994, there were 44,610 children under age 18 in the county. Of these, 31,130 were White and 13,480 were African-American and Other races. There were 33,682 children under age 18 in 1980, 25,656 in 1970, and 18,890 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 32.1% of the population in 1994, down from 49.5% in 1960, 45.7% in 1970 and 35.6% in 1980.

Figure 1: Population 0-18 by Race



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 47.8% of all households in 1990, as compared with 62.0% of households in 1960, had children below the age of 18.

Births to Teen Mothers: In 1994, 115 babies were born to mothers younger than age 18. These babies were 5.3% of all children born in the county; 4.6% of all White babies and 7.1% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 84.3% were born to single mothers.

In 1994, 323 babies were born to mothers younger than age 20. These babies were 14.9% of all children born in the county; 14.3% of all White babies and 16.3% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 56.7% were born to single mothers.

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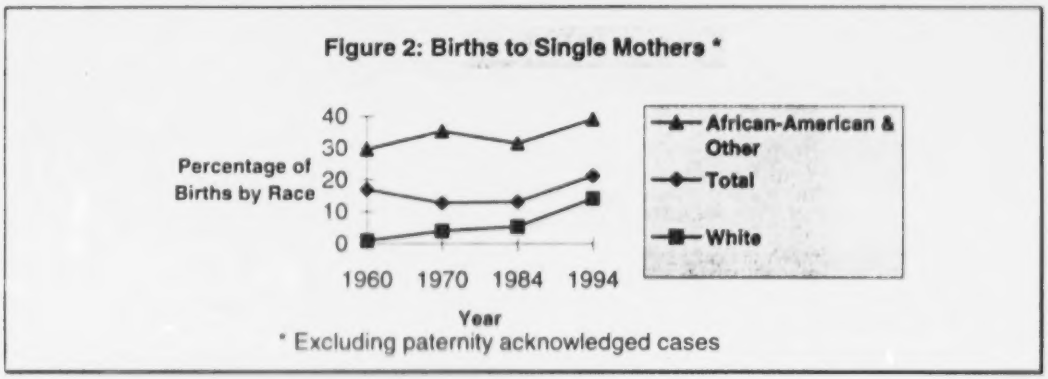
Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 357 babies, 16.4% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 40.3% in 1970.

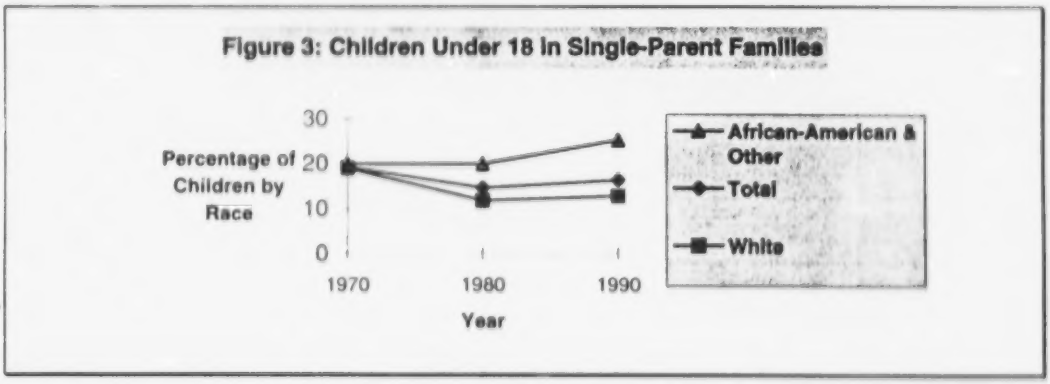
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 460 babies, 21.2% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 13.1% and in 1960 it was 16.9%. In 1994, 14.1% of White children and 39.0% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 128 babies, 5.9% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 588, constituting 27.0% of all babies, 19.7% of White babies, and 45.6% of African-American and Others.



Divorce Rate: In 1994, 861 marriage licenses were issued, while 517 divorce decrees involving 473 children were filed. In 1970 only 153 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 6,207 children lived with only one parent. This was 16.3% of all children, up from 14.6% in 1980 and 19.2% in 1970. In 1990, 12.8% of White children and 25.2% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 55.1% of mothers with children under 6 and 70.5% with children 6 - 17 were in the labor force. This has increased substantially from 21.8% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 2,214 children investigated as alleged child abuse and neglect victims: 41.9% for physical abuse, 15.5% for sexual abuse, 65.3% for neglect, and 63.4% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 588 children were victims of abuse and neglect: of these 47.1% were male and 52.9% were female; 66.8% were White, and 33.2% were African-American and Other. By age, 34.7% were 0 - 5, 39.8% were 6 - 12, and 25.5% were 13 - 17. They constituted 1.4% of all children age 18 or younger; 1.3% of all Whites and 1.5% of all African-Americans and Others. In the verified cases, 38.1% of abused and neglected children lived in two parent families, 36.7% in single parent families, 6.0% with extended families, and 19.2% in other circumstances.

Family Violence: In 1994, 1,005 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 35.0% of all assaults, which include both simple and aggravated assaults. Overall, 55.4% of all domestic assaults involve spouse abuse (constituting 19.3% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 3.6% of all children did not live with their natural parents; of these, 1,083 or 2.6% of children lived with relatives, 395 or 0.9% lived with non-relatives, and 24 were in institutional facilities.

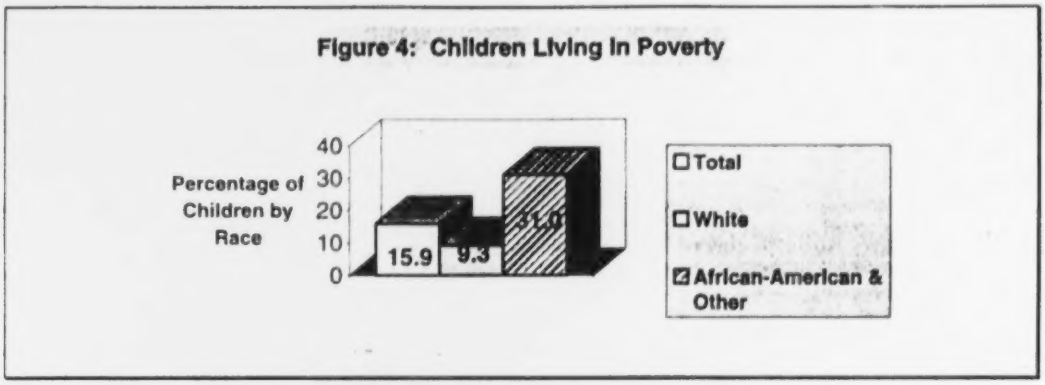
Out of Home Placements: As of September 30, 1996, 174 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 8.6% 0-2, 17.2% 3-5, 27.6% 6-10, 16.1% 11-13, and 30.5% 14 and above. The foster care population is comprised of 46.6% males and 53.4% females. Regarding their future, 10.9% were under a plan for placement in adoptive homes, 71.3% for return to a parent or guardian, 3.4% for placement with a relative, 4.6% for independent living, 9.2% for permanent foster care, and 0.0% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.11 adults for every person below age 18. This was up substantially from 1960, when there were only 1.02 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 6,598 children and youth under the age of 18 lived in families with incomes below poverty. Over 15.9% of all children and youth lived below poverty: 9.3% of Whites and 31.0% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 15.9% in 1989, it was 17.3% in 1979 and 35.3% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 17.3% of children 0 - 5 and 15.2% of children 6 - 17 lived in poverty; 22.5% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 47.4% of children in single-parent families lived in poverty, but only 8.2% of children in married-couple families were poor. Children in single-parent families made up 57.0% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 9,399 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 2,801 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	41,410	6,598	9,399	12,375	15,419	16,741	18,505
Percent		15.9%	22.7%	29.9%	37.2%	40.4%	44.7%
White	28,739	2,675	4,544	6,419	8,509	9,520	10,705
Percent		9.3%	15.8%	22.3%	29.6%	33.1%	37.2%
African-American and Other	12,671	3,923	4,855	5,956	6,910	7,221	7,800
Percent		31.0%	38.3%	47.0%	54.5%	57.0%	61.6%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 6.6% of households did not have a car; 3.3% of Whites and 17.1% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 6.4% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 10.3% of households had no phone.

Income: The mean income of families with children in 1989 was $33,157; in 1979, it had been $31,845, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 3.0%.

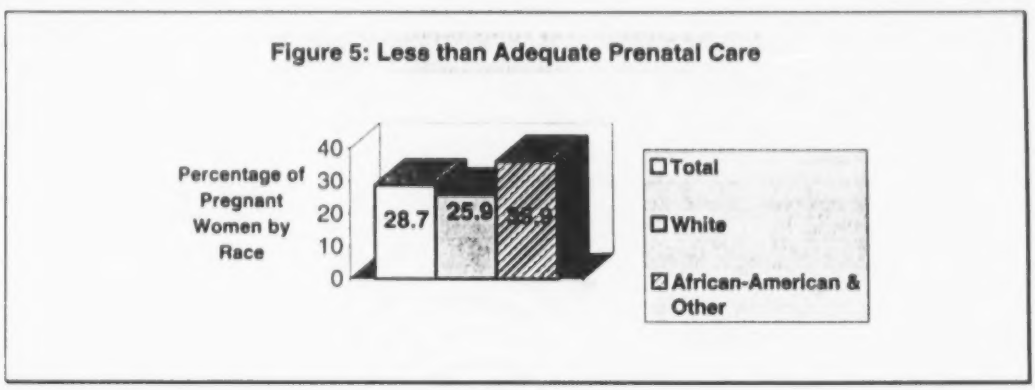
The mean income of single-parent families with children was $15,739 in 1989, as compared with $36,828 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 1,483 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 31.0% had child support court orders. The average monthly payment of child support was $16[illegible]86, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 497 parents in non-AFDC families were obligated to pay a monthly average of $238.94. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 388 or 17.8% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 625 or 28.7% of pregnant women received less than adequate prenatal care: 402 or 25.9% of Whites and 223 or 35.9% of African-Americans and Others. In that same year, 12 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 150 or 6.9% of all babies in the county were born with low birthweight. Over 9.9% of African-American babies and 5.7% of White babies were born with low birthweight. During 1992-94, approximately 108 or 1.5% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 18.0%. For Whites, the rate decreased by 41.1%, while for African-Americans and Others, the rate increased by 18.7%. Over the three-year period 1992-94, 30 White and 40 African-American and Other infants died before age one. By comparison, 45 White and 32 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 21 White and 13 African-American and Other children ages 1-14 died in the county. During 1982-84, 21 White and 10 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 54.9% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 20.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 1,474 to 2,211 youth ages 13-19 in the county were infected with a STD. In the county, there were 5 reported cases of children under age 15 and 38 youth ages 15 - 19 infected with gonorrhea; 1 youth ages 15 - 19 was reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 16.6% first smoked by age 11, 36.5% by age 13, and 47.0% by age 15. In a typical month, 18.0% of 7th and 8th graders and 24.0% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 29.7% of White 7th to 12th graders used cigarettes, in comparison with 5.2% African-Americans. A smaller but significant group of high school students (7.6%) used smokeless tobacco monthly; it was used primarily by White males (20.8%) compared with 1.4% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 4,461 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 1,262 students in grades 1-12 with learning disabilities and 433 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 2,808 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 6,602 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 35 nurses; 13 are currently available.

Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 24.7% for Whites and 30.8% for African-Americans and Others in 1995.

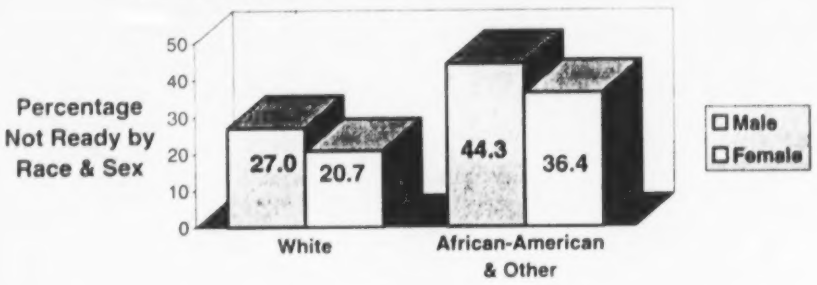
READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

661 children not ready	30.4% children not ready

Figure 6: Children Not "Ready" for First Grade



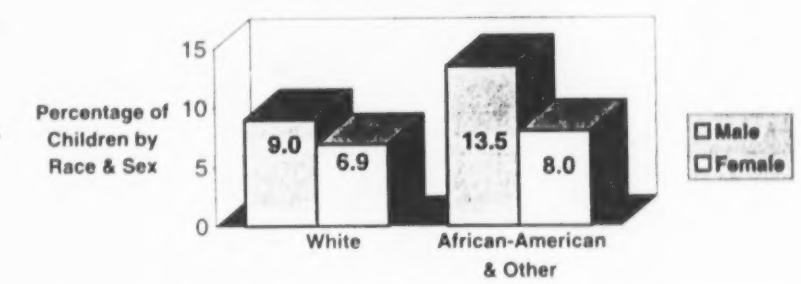
1st Grade Failures in 1995:

104 children failing	4.6% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

203 children failing	9.0% children failing

Figure 7: Failures Grades 1-3



Overage for Grade 3 in 1996:

239 children overage	12.4% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 483 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 11.7% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 30.4% assessed not ready for the 1st grade, 12.4% overage in grade 3, and 11.7% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

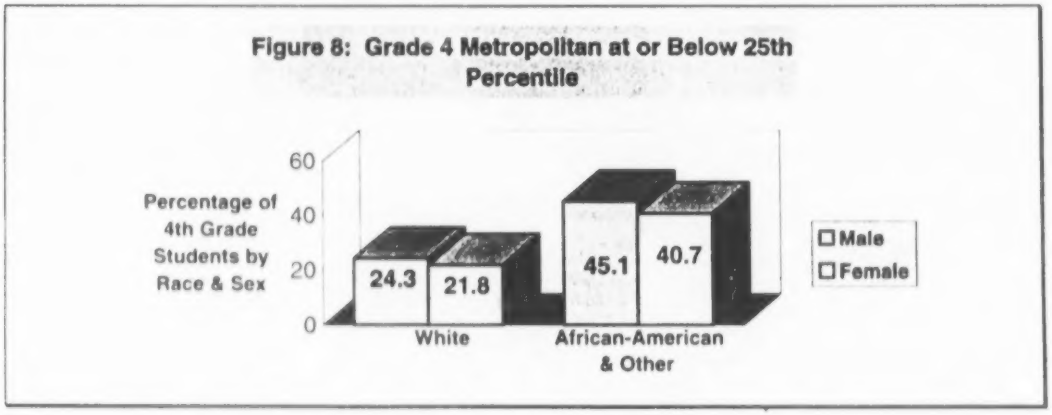
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 433 speech and language impaired, 1,262 learning disabled, 136 emotionally disabled, 316 mentally impaired, and 84 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 9.4% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

593 children at or below 25th percentile	30.1% children at or below 25th percentile



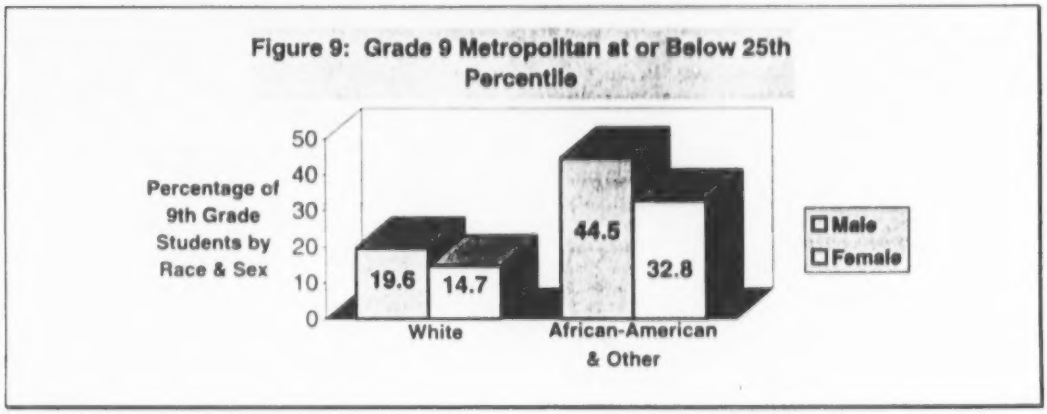
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	615	32.2	435	22.8
White Males	106	18.7	95	16.7
White Females	140	25.1	81	14.5
African-American & Other Males	158	43.5	119	32.8
African-American & Other Females	211	50.4	140	33.7

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

536 students at or below 25th percentile

25.9% students at or below 25th percentile

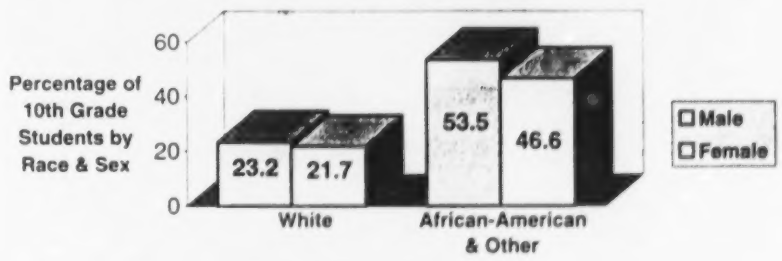


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

541 students not passing all parts

33.1% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



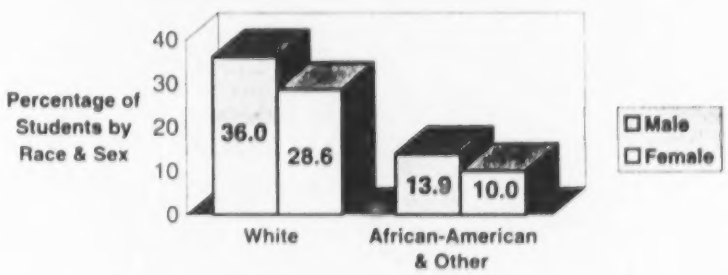
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 44.1% to 23.3% in math and from 43.5% to 19.2% in reading. During the 1990s the trend altered, with 32.2% not meeting 8th grade math standards in 1996 and 22.8% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 27.5% in 1983 on the CTBS, 28.6% in 1990 on the Stanford, and 31.4% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 27.9% in 1990 and 25.8% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

2,127 students drop out

25.9% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 27.1% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 27.5% during 1985-89, and 29.4% during 1990-94. During the 1995-96 period, 96.3% of all who did graduate received the State High School Diploma, while 2.0% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 1.7% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 111 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 187 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 14.2% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 22.8% to 33.1%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 661 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 8.6% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

5.0%	White Males	9.0%	African-American & Other Males
11.3%	White Females	9.5%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 202 girls between the ages of 14 and 17 became pregnant in 1993 and 179 in 1994. In 1994, this represented 4.4% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 4.0% for Whites and 5.2% for African-Americans and others. Of all pregnancies to 14-17 year olds, 64.2% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 12.4%.

Alcohol Use: In 1992-93, 23.0% of 7th and 8th graders and 38.0% of high schoolers said they had used alcohol in the past month. Of White males, 36.2% had used it in the past month, compared with 28.4% of African-American males; likewise, 36.2% of White females said they had used alcohol, compared with 19.1% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 19.1% had used alcohol by age 11 or younger, 42.6% by age 13, and 63.0% by age 15.

During the previous year, 33.2% of 7th and 8th graders and 40.8% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 29.4% said they had driven after drinking, and 11.7% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 62.5% of eighth graders and 89.1% of seniors felt that beer was easy to get; 52.0% of eighth graders and 50.8% of seniors felt there was not a great risk in using it regularly.

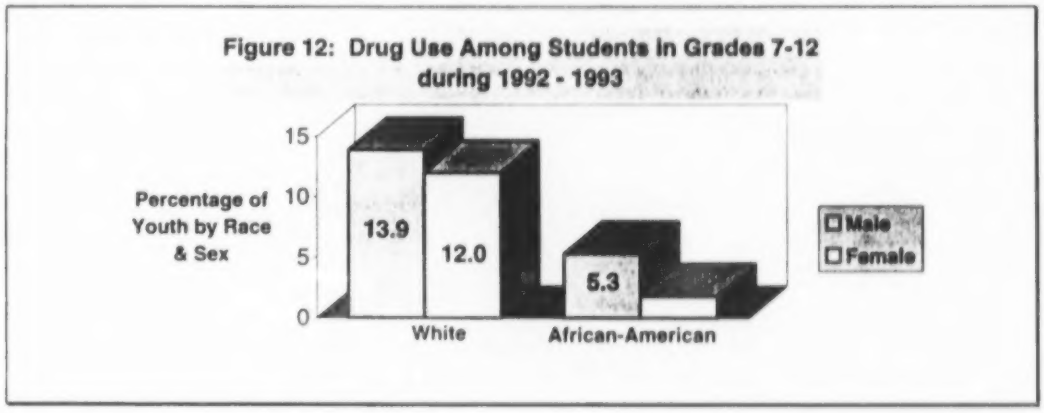
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 29.8% of all high school students in 1992-93 responded 3 or more drinks at a time; 17.0% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 6.0% of 7th and 8th graders and 12.3% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (13.9%) and White females (12.0%); use among African-American males was 5.3%; African-American females, 1.8%. Some young people first used drugs at an early age: among students 15 and older, 3.2% experienced their first use by age 11 or sooner; 10.0% had used a drug by age 13, and 19.0% by age 15.

Of seniors who had initiated use of marijuana, 9.3% had started use at home, 49.8% at a friend's home, and 40.9% elsewhere. During the past year, 3.9% of all high school students said that they used marijuana at home, 9.9% at a friend's house, and 7.3% in a car. In the past year, 7.2% of all high school students who drive and 11.8% of seniors who drive said that they had driven after using drugs . Furthermore, 7.3% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 29.1% of 8th graders who had an opinion said it is easy to get marijuana and 21.5% said it is easy to get cocaine or crack; 78.9% of seniors who had an opinion said it is easy to get marijuana and 60.4% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 19.9% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 723 individual juvenile offenders in the county were referred to the Solicitor; of these, 12.3% were age 12 or younger, 31.7% were 13 or 14, and 56.0% were 15 or older.

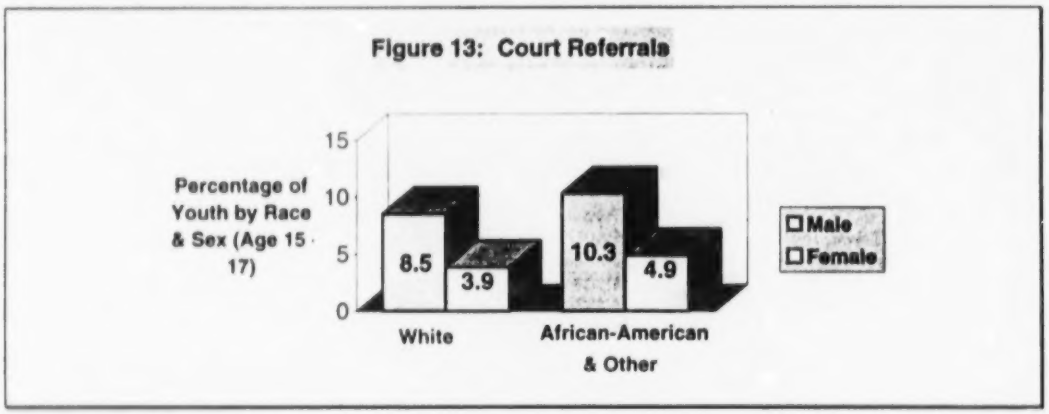
Of the referrals to the family court, 14.2% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 157 juvenile cases constituting 14.5% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 23.1% lived in families with income under $10,000, 31.0% with $10,000-$19,999 and 45.9% with $20,000 or more. Furthermore, only 29.2% of delinquents lived with both natural parents, while 38.7% lived in a single parent household and 32.1% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 31.0% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 34.6% had at least one prior referral and 13.7% had been referred to court 3 times or more.

In 1994-95, there were 19 juvenile commitments from the county to State institutions.

During 1994-95, 402 youth ages 15 to 17 were referred to the family courts. In the county, 6.7% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 48 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 16 deaths between 1990 and 1994; homicides killed 8 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 16.3% of children in single-parent families, 15.9% in poverty, 25.9% dropping out of school, 38.0% of high school students using alcohol and 19.9% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

Dr. A. Baron Holmes (803-734-2291) E-mail bholmes@ogc.state.sc.us
-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

BERKELEY

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	115	5.3	7.3	0.73	4	1994
Births to Mothers Not Completing High School	357	16.4	21.8	0.75	5	1994
Births to Single Mothers	460	21.2	30.4	0.70	6	1994
Children in Single-Parent Families	6,207	16.3	25.1	0.65	2	1990
Parents Working	10,423	64.8	74.3	0.87	1	1990
Abuse & Neglect Victims	588	1.4	1.0	1.40	36	1995-96
Separation from Parents	1,502	3.6	5.1	0.71	2	1990
Economic Status						
Poor Children	6,598	15.9	21.0	0.76	8	1989
Mean Income of Families with Children	$33,157	NA	NA	0.93	21	1989
Health						
Less than Adequate Prenatal Care	625	28.7	32.0	0.90	14	1994
Low Birth Weight	150	6.9	9.2	0.75	3	1994
Not Adequately Immunized	342	20.0	18.0	1.11	38	1995
Cigarette Smokers (High School)	1,425	24.0	23.1	1.04	32	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	661	30.4	28.1	1.08	29	1994-95
1st Grade Failures	104	4.6	6.8	0.68	9	1994-95
Failures grades 1-3 (approx. %)	203	9.0	11.3	0.80	14	1994-95
Overage for Grade 3	239	12.4	16.2	0.77	10	1995-96
Special Education (ages 8 and 9)	483	11.7	15.3	0.76	5	1995-96
School Achievement						
Special Education Grades 1 - 12	2,231	9.4	13.0	0.72	1	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	593	30.1	27.9	1.08	20	1995-96
Grade 8 BSAP - Math (Below standards)	615	32.2	34.8	0.93	14	1995-96
Grade 8 BSAP - Reading (Below standards)	435	22.8	28.8	0.79	6	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	536	25.9	29.5	0.88	13	1995-96
Exit Exam (Not passing all parts on 1st attempt)	541	33.1	35.3	0.94	14	1995-96
Dropout Rate	2,127	25.9	27.3	0.95	20	1992-95
25-34 Year olds with no HS Degree or GED	3,720	14.2	19.1	0.74	4	1990
Adolescent Risk Behavior						
Not in School or Employed	661	8.6	9.6	0.90	9	1990
Pregnancy (Ages 14 - 17)	179	4.4	4.8	0.92	12	1994
Alcohol Use (High School)	2,256	38.0	37.4	1.02	29	1992-93
Drug Use (High School)	730	12.3	12.8	0.96	31	1992-93
Binge Drinking (5 or more drinks)	1,009	17.0	16.3	1.04	30	1992-93
Delinquency (ages 15 - 17)	402	6.7	6.4	1.05	25	1994-95

* 1 = "best" 46 = "worst"

BERKELEY TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	106	4.3	0.65	1992	122	5.1	0.77	1993	115	5.3	0.73	1994
Births to Mothers Not Completing High School	422	17.2	0.73	1992	420	17.5	0.78	1993	357	16.4	0.75	1994
Births to Single Mothers	481	19.6	0.65	1992	517	21.6	0.71	1993	460	21.2	0.70	1994
Children in Single-Parent Families		19.2	1.32	1970		14.6	0.77	1980	6,207	16.3	0.65	1990
Economic Status												
Poor Children		35.3	1.23	1969		17.3	0.82	1979	6,598	15.9	0.76	1989
Mean Income of Families with Children					31,845	N/A	1.04	1979	33,157	N/A	1.07	1989
Health												
Less than Adequate Prenatal Care	699	28.4	0.72	1992	586	24.5	0.69	1993	625	28.7	0.90	1994
Low Birth Weight	191	7.8	0.87	1992	188	7.8	0.84	1993	150	6.9	0.75	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	710	28.4	1.07	1990-91	671	28.1	1.01	1992-93	661	30.4	1.08	1994-95
1st Grade Failures	173	7.0	0.78	1991-92	129	6.3	0.65	1992-93	104	4.6	0.68	1994-95
Failures Grades 1-3 (approx. %)	297	12.2	0.87	1991-92	220	10.8	0.76	1992-93	203	9.0	0.80	1994-95
Overage for Grade 3	481	20.7	0.80	1991-92	371	16.4	0.80	1993-94	239	12.4	0.77	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	422	18.6	0.96	1991-92	418	19.3	0.97	1993-94	593	30.1	1.08	1995-96*
Grade 8 BSAP - Math (Below Standards)	314	17.3	0.64	1991-92	515	25.8	0.83	1993-94	615	32.2	0.93	1995-96
Grade 8 BSAP - Reading (Below Standards)	308	17.0	0.70	1991-92	460	23.0	0.80	1993-94	435	22.8	0.79	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	298	14.6	0.67	1991-92	368	17.8	0.73	1993-94	536	25.9	0.88	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	421	25.0	0.80	1991-92	443	27.5	0.84	1993-94	541	33.1	0.94	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	159	4.0	0.85	1992	202	4.9	1.09	1993	179	4.4	0.92	1994
Alcohol Use (High School)	2,433	46.0	1.14	1989-90					2,256	38.0	1.02	1992-93
Drug Use (High School)	735	13.9	1.04	1989-90					730	12.3	0.96	1992-93
Binge Drinking (5 or more drinks)		16.1	1.03	1989-90					1,009	17.0	1.04	1992-93

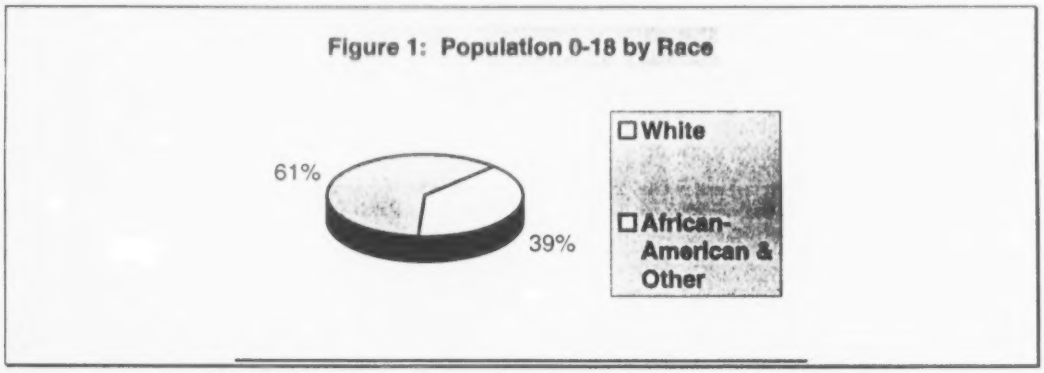
SOUTH CAROLINA kids count

1996 Report CALHOUN

DEMOGRAPHICS

In 1994, there were 3,620 children under age 18 in the county. Of these, 1,400 were White and 2,220 were African-American and Other races. There were 3,929 children under age 18 in 1980, 4,402 in 1970, and 5,789 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 27.0% of the population in 1994, down from 47.2% in 1960, 40.8% in 1970 and 32.2% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 34.5% of all households in 1990, as compared with 44.0% of households in 1960, had children below the age of 18.

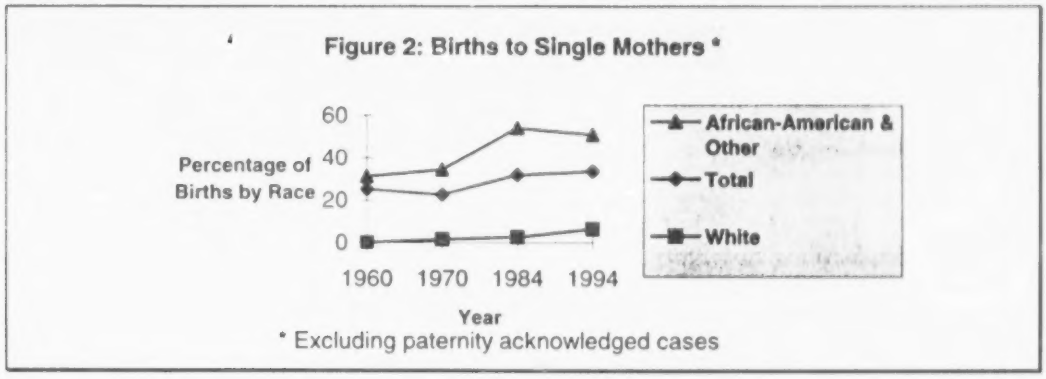
Births to Teen Mothers: In 1994, 24 babies were born to mothers younger than age 18. These babies were 12.2% of all children born in the county; 3.9% of all White babies and 17.5% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 66.7% were born to single mothers.

In 1994, 46 babies were born to mothers younger than age 20. These babies were 23.4% of all children born in the county; 6.5% of all White babies and 34.2% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 65.2% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 42 babies, 21.3% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 45.3% in 1970.

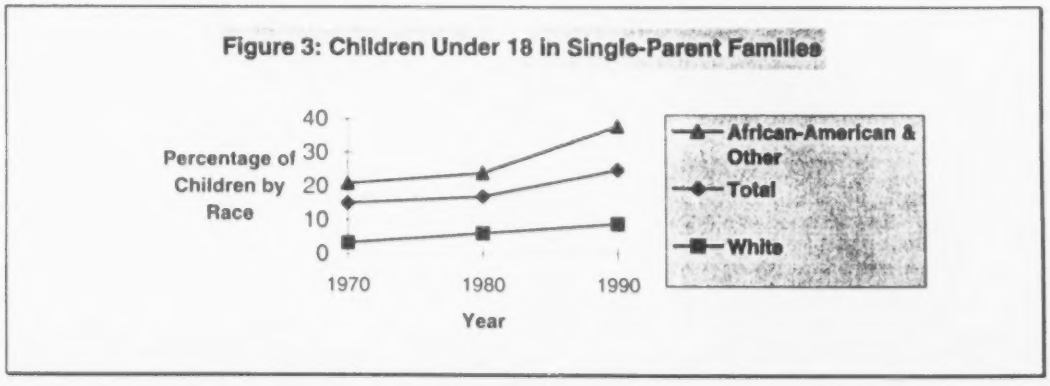
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 66 babies, 33.5% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 31.8% and in 1960 it was 25.1%. In 1994, 6.5% of White children and 50.8% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 30 babies, 15.2% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 96, constituting 48.7% of all babies, 13.0% of White babies, and 71.7% of African-American and Others.



Divorce Rate: In 1994, 80 marriage licenses were issued, while 42 divorce decrees involving 34 children were filed. In 1970 only 15 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 710 children lived with only one parent. This was 24.8% of all children, up from 16.9% in 1980 and 14.9% in 1970. In 1990, 8.9% of White children and 37.8% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 57.2% of mothers with children under 6 and 77.8% with children 6 - 17 were in the labor force. This has increased substantially from 33.1% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 232 children investigated as alleged child abuse and neglect victims: 33.6% for physical abuse, 12.1% for sexual abuse, 81.5% for neglect, and 56.0% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 72 children were victims of abuse and neglect: of these 45.8% were male and 54.2% were female; 19.4% were White, and 80.6% were African-American and Other. By age, 31.9% were 0 - 5, 44.4% were 6 - 12, and 23.6% were 13 - 17. They constituted 2.0% of all children age 18 or younger; 1.0% of all Whites and 2.6% of all African-Americans and Others. In the verified cases, 4.2% of abused and neglected children lived in two parent families, 25.0% in single parent families, 8.3% with extended families, and 62.5% in other circumstances.

Family Violence: In 1994, 110 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 39.0% of all assaults, which include both simple and aggravated assaults. Overall, 54.5% of all domestic assaults involve spouse abuse (constituting 21.5% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 5.9% of all children did not live with their natural parents; of these, 163 or 4.6% of children lived with relatives, 43 or 1.2% lived with non-relatives, and 0 were in institutional facilities.

Out of Home Placements: As of September 30, 1996, 15 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 0.0% 0-2, 6.7% 3-5, 33.3% 6-10, 13.3% 11-13, and 46.7% 14 and above. The foster care population is comprised of 46.7% males and 53.3% females. Regarding their future, 20.0% were under a plan for placement in adoptive homes, 33.3% for return to a parent or guardian, 13.3% for placement with a relative, 6.7% for independent living, 26.7% for permanent foster care, and 0.0% for other circumstances.

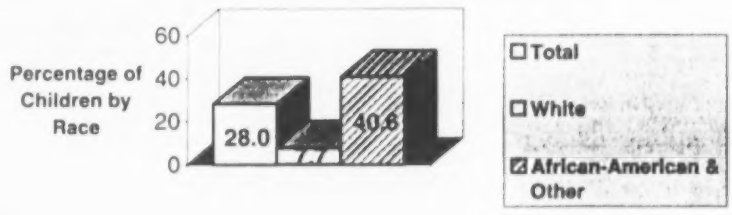
Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.7 adults for every person below age 18. This was up substantially from 1960, when there were only 1.12 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 975 children and youth under the age of 18 lived in families with incomes below poverty. Over 28.0% of all children and youth lived below poverty: 7.7% of Whites and 40.6% of African-Americans and others.

Figure 4: Children Living In Poverty



Poverty has always been a serious problem. While the rate among children under age 18 was 28.0% in 1989, it was 27.8% in 1979 and 45.5% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 34.2% of children 0 - 5 and 25.1% of children 6 - 17 lived in poverty; 26.4% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 59.8% of children in single-parent families lived in poverty, but only 12.9% of children in married-couple families were poor. Children in single-parent families made up 67.3% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 1,319 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 344 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	3,484	975	1,319	1,459	1,644	1,766	1,858
Percent		28.0%	37.9%	41.9%	47.2%	50.7%	53.3%
White	1,332	102	149	208	266	308	358
Percent		7.7%	11.2%	15.6%	20.0%	23.1%	26.9%
African-American and Other	2,152	873	1,170	1,251	1,378	1,458	1,500
Percent		40.6%	54.4%	58.1%	64.0%	67.8%	69.7%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 14.9% of households did not have a car; 4.1% of Whites and 27.5% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 11.8% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 32.8% of households had no phone.

Income: The mean income of families with children in 1989 was $32,602; in 1979, it had been $28,852, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 3.6%.

The mean income of single-parent families with children was $12,187 in 1989, as compared with $39,868 in married-couple families with children.

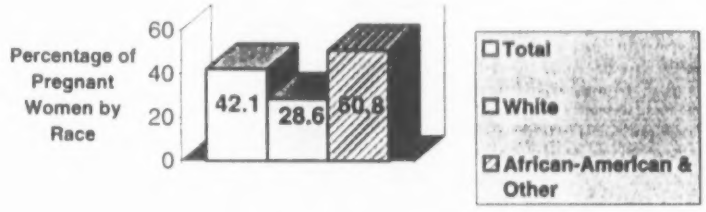
Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 274 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 43.4% had child support court orders. The average monthly payment of child support was $141.87, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 114 parents in non-AFDC families were obligated to pay a monthly average of $175.82. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 71 or 36.0% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 83 or 42.1% of pregnant women received less than adequate prenatal care: 22 or 28.6% of Whites and 61 or 50.8% of African-Americans and Others. In that same year, 3 women received no prenatal care at all.

Figure 5: Less than Adequate Prenatal Care



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 19 or 9.6% of all babies in the county were born with low birthweight. Over 14.2% of African-American babies and 2.6% of White babies were born with low birthweight. During 1992-94, approximately 10 or 1.9% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 53.3%. For Whites, the rate increased by 11.3%, while for African-Americans and Others, the rate decreased by 78.5%. Over the three-year period 1992-94, 2 White and 1 African-American and Other infants died before age one. By comparison, 2 White and 5 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 0 White and 4 African-American and Other children ages 1-14 died in the county. During 1982-84, 0 White and 2 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 48.3% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 6.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 139 to 209 youth ages 13-19 in the county were infected with a STD. In the county, there were 3 reported cases of children under age 15 and 4 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 11.6% first smoked by age 11, 22.1% by age 13, and 31.5% by age 15. In a typical month, 10.5% of 7th and 8th graders and 14.6% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 36.5% of White 7th to 12th graders used cigarettes, in comparison with 7.5% African-Americans. A smaller but significant group of high school students (3.6%) used smokeless tobacco monthly; it was used primarily by White males (33.3%) compared with 0.4% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 362 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 118 students in grades 1-12 with learning disabilities and 106 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 240 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 536 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 3 nurses; 1 are currently available.

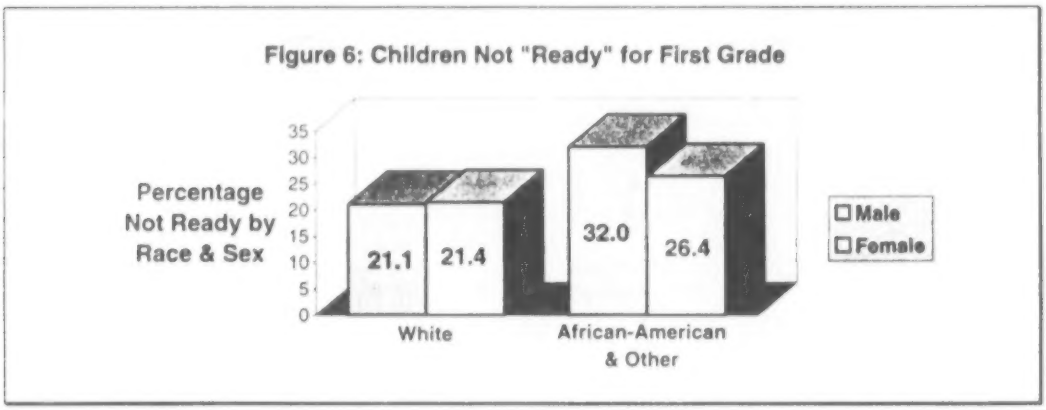
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 29.5% for Whites and 37.3% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

45 children not ready	28.0% children not ready

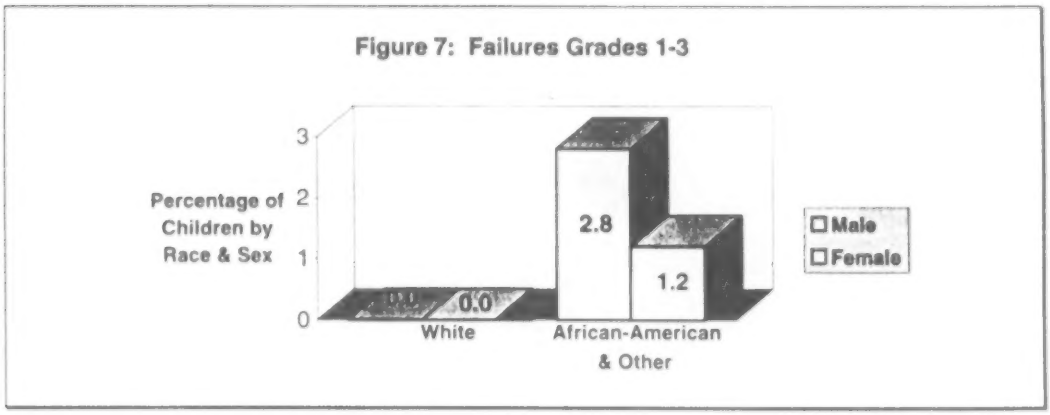


1st Grade Failures in 1995:

3 children failing	1.6% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

3 children failing	1.6% children failing



Overage for Grade 3 in 1996:

30 children overage	21.9% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 52 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 15.6% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 28.0% assessed not ready for the 1st grade, 21.9% overage in grade 3, and 15.6% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

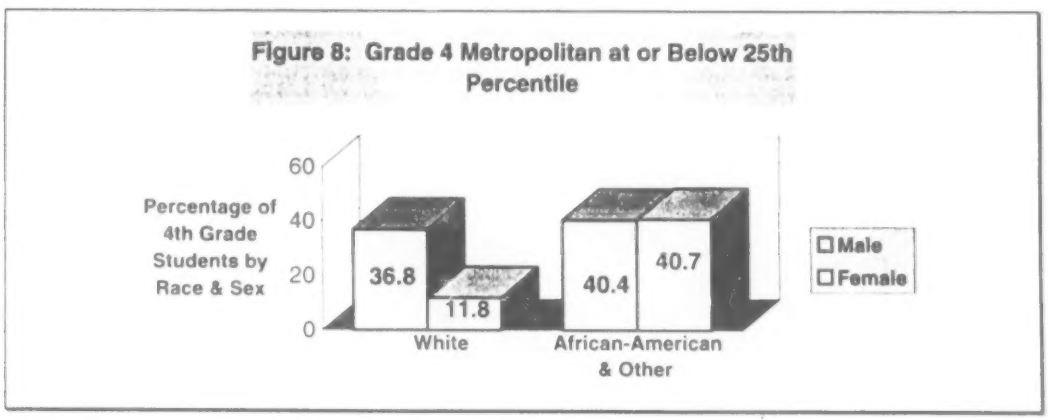
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 106 speech and language impaired, 118 learning disabled, 4 emotionally disabled, 79 mentally impaired, and 6 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 16.4% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996
(i.e. below 75% of students nationwide)

56 children at or below 25th percentile	36.8% children at or below 25th percentile



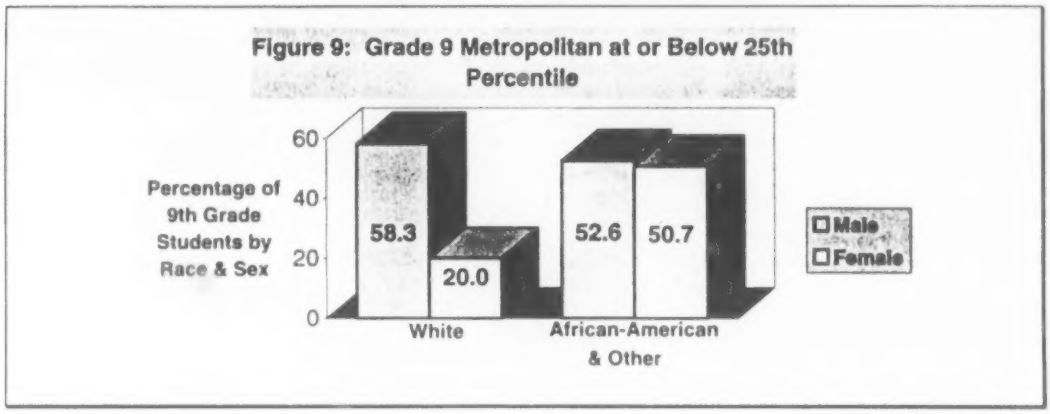
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	37	26.6	45	32.4
White Males	4	26.7	4	26.7
White Females	3	23.1	2	15.4
African-American & Other Males	13	27.7	22	46.8
African-American & Other Females	17	26.6	17	26.6

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

86 students at or below 25th percentile

50.6% students at or below 25th percentile

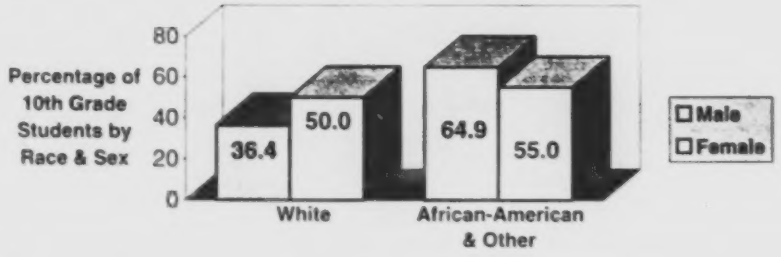


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

77 students not passing all parts

57.5% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



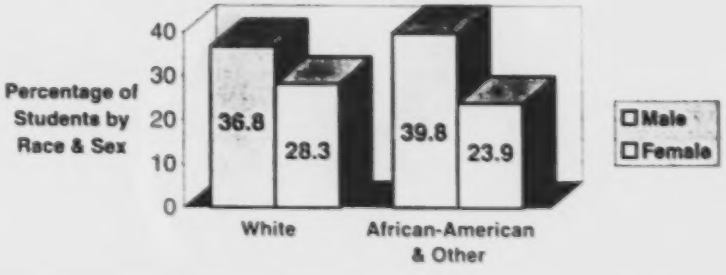
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 80.1% to 44.4% in math and from 71.4% to 29.6% in reading. During the 1990s the trend altered, with 26.6% not meeting 8th grade math standards in 1996 and 32.4% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 36.4% in 1983 on the CTBS, 32.6% in 1990 on the Stanford, and 39.3% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 36.4% in 1990 and 52.7% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

193 students drop out

32.6% students drop out

Figure 11: Dropout Rate, 1992-1995



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Dropouts: A distressing number of students drop out and fail to graduate. An average 28.0% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 29.6% during 1985-89, and 28.1% during 1990-94. During the 1995-96 period, 88.7% of all who did graduate received the State High School Diploma, while 6.6% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 4.7% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 5 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 22 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 21.9% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 26.6% to 57.5%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 84 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 10.9% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

11.0%	White Males	8.6%	African-American & Other Males
7.5%	White Females	16.1%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 23 girls between the ages of 14 and 17 became pregnant in 1993 and 28 in 1994. In 1994, this represented 7.0% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 3.1% for Whites and 9.2% for African-Americans and others. Of all pregnancies to 14-17 year olds, 82.1% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it increased by 40.0%.

Alcohol Use: In 1992-93, 24.2% of 7th and 8th graders and 34.3% of high schoolers said they had used alcohol in the past month. Of White males, 46.8% had used it in the past month, compared with 33.7% of African-American males; likewise, 33.3% of White females said they had used alcohol, compared with 21.0% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 17.4% had used alcohol by age 11 or younger, 34.4% by age 13, and 55.9% by age 15.

During the previous year, 42.2% of 7th and 8th graders and 44.3% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 24.6% said they had driven after drinking, and 12.7% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 51.3% of eighth graders and 80.7% of seniors felt that beer was easy to get; 53.6% of eighth graders and 37.8% of seniors felt there was not a great risk in using it regularly.

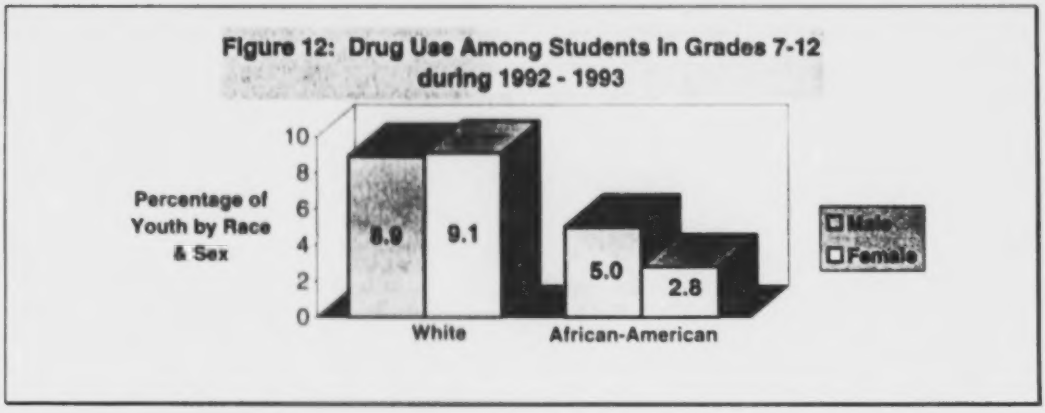
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 22.8% of all high school students in 1992-93 responded 3 or more drinks at a time; 11.1% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 3.7% of 7th and 8th graders and 5.6% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (8.9%) and White females (9.1%); use among African-American males was 5.0%; African-American females, 2.8%. Some young people first used drugs at an early age: among students 15 and older, 1.1% experienced their first use by age 11 or sooner; 4.1% had used a drug by age 13, and 8.0% by age 15.

Of seniors who had initiated use of marijuana, 27.4% had started use at home, 17.9% at a friend's home, and 54.7% elsewhere. During the past year, 1.5% of all high school students said that they used marijuana at home, 4.5% at a friend's house, and 2.5% in a car. In the past year, 4.3% of all high school students who drive and 4.3% of seniors who drive said that they had driven after using drugs . Furthermore, 5.2% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 24.7% of 8th graders who had an opinion said it is easy to get marijuana and 25.3% said it is easy to get cocaine or crack; 51.6% of seniors who had an opinion said it is easy to get marijuana and 48.2% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 9.1% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 35 individual juvenile offenders in the county were referred to the Solicitor; of these, 11.4% were age 12 or younger, 25.7% were 13 or 14, and 62.9% were 15 or older.

Of the referrals to the family court, 12.8% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 15 juvenile cases constituting 31.9% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

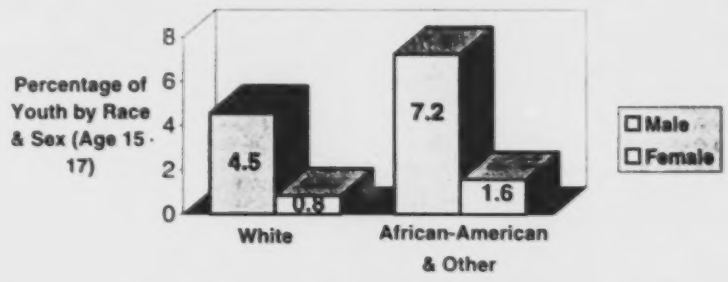
Delinquents are likely to live in families with low income: 62.5% lived in families with income under $10,000, 25.0% with $10,000-$19,999 and 12.5% with $20,000 or more. Furthermore, only 28.6% of delinquents lived with both natural parents, while 46.4% lived in a single parent household and 25.0% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 40.7% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 25.7% had at least one prior referral and 5.7% had been referred to court 3 times or more.

In 1994-95, there were 7 juvenile commitments from the county to State institutions.

During 1994-95, 22 youth ages 15 to 17 were referred to the family courts. In the county, 3.7% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.

Figure 13: Court Referrals



Deaths: During 1990-94, 5 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 3 deaths between 1990 and 1994; homicides killed 1 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 24.8% of children in single-parent families, 28.0% in poverty, 32.6% dropping out of school, 34.3% of high school students using alcohol and 9.1% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

Dr. A. Baron Holmes (803-734-2291) E-mail bholmes@ogc.state.sc.us

-or-

SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

CALHOUN

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	24	12.2	7.3	1.67	42	1994
Births to Mothers Not Completing High School	42	21.3	21.8	0.98	10	1994
Births to Single Mothers	66	33.5	30.4	1.10	18	1994
Children in Single-Parent Families	710	24.8	25.1	0.99	16	1990
Parents Working	975	71.3	74.3	0.96	8	1990
Abuse & Neglect Victims	72	2.0	1.0	2.00	45	1995-96
Separation from Parents	206	5.9	5.1	1.16	26	1990
Economic Status						
Poor Children	975	28.0	21.0	1.33	31	1989
Mean Income of Families with Children	$32,602	NA	NA	0.92	22	1989
Health						
Less than Adequate Prenatal Care	83	42.1	32.0	1.32	38	1994
Low Birth Weight	19	9.6	9.2	1.04	25	1994
Not Adequately Immunized	12	6.0	18.0	0.33	2	1995
Cigarette Smokers (High School)	70	14.6	23.1	0.63	9	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	45	28.0	28.1	1.00	22	1994-95
1st Grade Failures	3	1.6	6.8	0.24	1	1994-95
Failures grades 1-3 (approx. %)	3	1.6	11.3	0.14	1	1994-95
Overage for Grade 3	30	21.9	16.2	1.35	39	1995-96
Special Education (ages 8 and 9)	52	15.6	15.3	1.02	24	1995-96
School Achievement						
Special Education Grades 1 - 12	313	16.4	13.0	1.26	41	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	56	36.8	27.9	1.32	32	1995-96
Grade 8 BSAP - Math (Below standards)	37	26.6	34.8	0.76	5	1995-96
Grade 8 BSAP - Reading (Below standards)	45	32.4	28.8	1.13	25	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	86	50.6	29.5	1.72	43	1995-96
Exit Exam (Not passing all parts on 1st attempt)	77	57.5	35.3	1.63	42	1995-96
Dropout Rate	193	32.6	27.3	1.19	36	1992-95
25-34 Year olds with no HS Degree or GED	424	21.9	19.1	1.15	15	1990
Adolescent Risk Behavior						
Not in School or Employed	84	10.9	9.6	1.14	25	1990
Pregnancy (Ages 14 - 17)	28	7.0	4.8	1.46	42	1994
Alcohol Use (High School)	165	34.3	37.4	0.92	14	1992-93
Drug Use (High School)	27	5.6	12.8	0.44	7	1992-93
Binge Drinking (5 or more drinks)	53	11.1	16.3	0.68	6	1992-93
Delinquency (ages 15 - 17)	22	3.7	6.4	0.58	2	1994-95

* 1 = "best" 46 = "worst"

CALHOUN TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	16	8.8	1.33	1992	17	11.0	1.67	1993	24	12.2	1.67	1994
Births to Mothers Not Completing High School	39	21.4	0.91	1992	34	22.1	0.99	1993	42	21.3	0.98	1994
Births to Single Mothers	62	34.1	1.13	1992	60	39.0	1.29	1993	66	33.5	1.10	1994
Children in Single-Parent Families		14.9	1.03	1970		16.9	0.89	1980	710	24.8	0.99	1990
Economic Status												
Poor Children		45.5	1.59	1969		27.8	1.31	1979	975	28.0	1.33	1989
Mean Income of Families with Children					28,852	N/A	1.15	1979	32,602	N/A	1.09	1989
Health												
Less than Adequate Prenatal Care	101	5.5	1.41	1992	69	44.8	1.27	1993	83	42.1	1.32	1994
Low Birth Weight	18	9.9	1.10	1992	13	8.4	0.90	1993	19	9.6	1.04	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	51	31.1	1.17	1990-91	59	34.7	1.25	1992-93	45	28.0	1.00	1994-95
1st Grade Failures	19	12.1	1.34	1991-92	9	6.4	0.66	1992-93	3	1.6	0.24	1994-95
Failures Grades 1-3 (approx. %)	42	25.1	1.78	1991-92	18	12.0	0.84	1992-93	3	1.6	0.14	1994-95
Overage for Grade 3	65	38.0	1.47	1991-92	46	31.1	1.52	1993-94	30	21.9	1.38	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	14	10.7	0.55	1991-92	36	20.9	1.06	1993-94	56	36.8	1.32	1995-96*
Grade 8 BSAP - Math (Below Standards)	50	33.1	1.23	1991-92	68	41.5	1.34	1993-94	37	26.6	0.76	1995-96
Grade 8 BSAP - Reading (Below Standards)	41	27.2	1.11	1991-92	67	41.4	1.44	1993-94	45	32.4	1.13	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	56	33.3	1.52	1991-92	67	39.0	1.60	1993-94	86	50.6	1.72	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	50	47.2	1.52	1991-92	76	52.8	1.61	1993-94	77	57.5	1.63	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	18	4.6	0.98	1992	23	5.9	1.31	1993	28	7.0	1.46	1994
Alcohol Use (High School)	151	35.2	0.88	1989-90					165	34.3	0.92	1992-93
Drug Use (High School)	26	6.1	0.46	1989-90					27	5.6	0.44	1992-93
Binge Drinking (5 or more drinks)		7.2	0.46	1989-90					53	11.1	0.68	1992-93

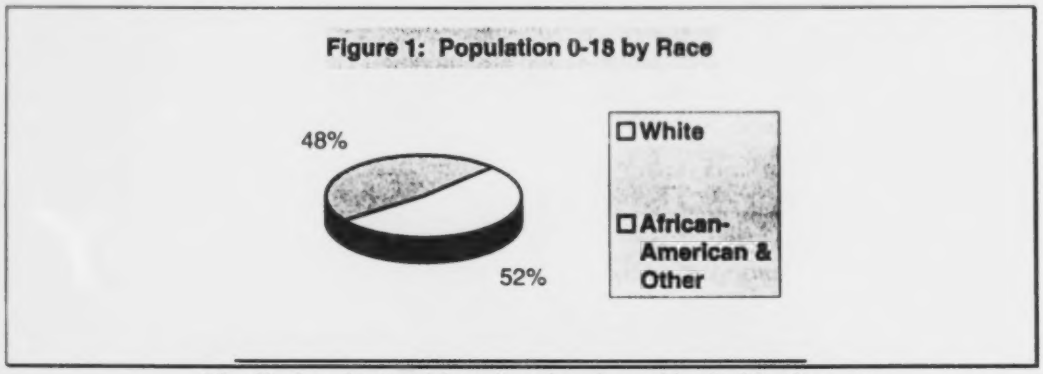
SOUTH CAROLINA kids count

1996 Report CHARLESTON

DEMOGRAPHICS

In 1994, there were 75,630 children under age 18 in the county. Of these, 39,730 were White and 35,900 were African-American and Other races. There were 77,551 children under age 18 in 1980, 91,324 in 1970, and 90,845 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 25.8% of the population in 1994, down from 42.0% in 1960, 36.9% in 1970 and 28.0% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 32.7% of all households in 1990, as compared with 50.0% of households in 1960, had children below the age of 18.

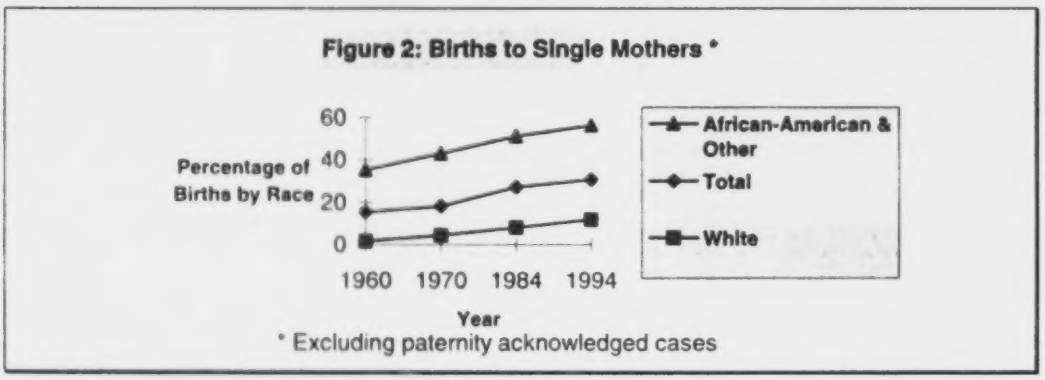
Births to Teen Mothers: In 1994, 259 babies were born to mothers younger than age 18. These babies were 5.7% of all children born in the county; 2.6% of all White babies and 9.8% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 84.9% were born to single mothers.

In 1994, 665 babies were born to mothers younger than age 20. These babies were 14.6% of all children born in the county; 8.6% of all White babies and 22.7% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 74.3% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 849 babies, 18.6% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 36.5% in 1970.

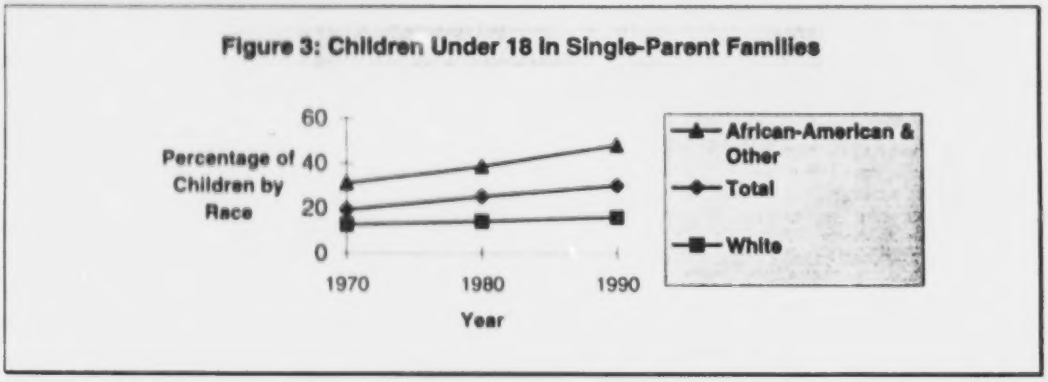
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 1,404 babies, 30.8% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 27.3% and in 1960 it was 15.3%. In 1994, 11.8% of White children and 56.3% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 298 babies, 6.5% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 1,702, constituting 37.4% of all babies, 16.6% of White babies, and 65.2% of African-American and Others.



Divorce Rate: In 1994, 4,046 marriage licenses were issued, while 1,514 divorce decrees involving 1,227 children were filed. In 1970 only 830 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 18,953 children lived with only one parent. This was 30.0% of all children, up from 24.9% in 1980 and 19.3% in 1970. In 1990, 15.9% of White children and 47.9% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 64.3% of mothers with children under 6 and 76.4% with children 6 - 17 were in the labor force. This has increased substantially from 27.2% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 2,512 children investigated as alleged child abuse and neglect victims: 26.6% for physical abuse, 5.9% for sexual abuse, 71.1% for neglect, and 32.8% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 774 children were victims of abuse and neglect: of these 46.3% were male and 53.7% were female; 30.2% were White, and 69.8% were African-American and Other. By age, 39.5% were 0 - 5, 40.3% were 6 - 12, and 20.2% were 13 - 17. They constituted 1.1% of all children age 18 or younger; 0.6% of all Whites and 1.6% of all African-Americans and Others. In the verified cases, 24.0% of abused and neglected children lived in two parent families, 54.7% in single parent families, 11.0% with extended families, and 10.3% in other circumstances.

Family Violence: In 1994, 2,752 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 29.0% of all assaults, which include both simple and aggravated assaults. Overall, 59.2% of all domestic assaults involve spouse abuse (constituting 17.1% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 4.8% of all children did not live with their natural parents; of these, 2,408 or 3.3% of children lived with relatives, 946 or 1.3% lived with non-relatives, and 167 were in institutional facilities.

Out of Home Placements: As of September 30, 1996, 540 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 12.4% 0-2, 16.1% 3-5, 22.2% 6-10, 16.7% 11-13, and 32.6% 14 and above. The foster care population is comprised of 53.1% males and 46.9% females. Regarding their future, 23.5% were under a plan for placement in adoptive homes, 49.8% for return to a parent or guardian, 3.7% for placement with a relative, 10.4% for independent living, 12.4% for permanent foster care, and 0.0% for other circumstances.

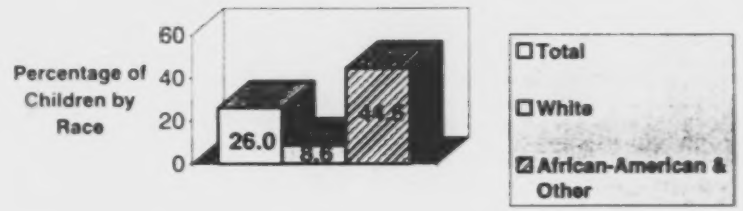
Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.88 adults for every person below age 18. This was up substantially from 1960, when there were only 1.38 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 18,965 children and youth under the age of 18 lived in families with incomes below poverty. Over 26.0% of all children and youth lived below poverty: 8.6% of Whites and 44.5% of African-Americans and others.

Figure 4: Children Living in Poverty



Poverty has always been a serious problem. While the rate among children under age 18 was 26.0% in 1989, it was 24.0% in 1979 and 30.0% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 27.0% of children 0 - 5 and 25.4% of children 6 - 17 lived in poverty; 17.6% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 57.5% of children in single-parent families lived in poverty, but only 10.3% of children in married-couple families were poor. Children in single-parent families made up 72.9% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 23,608 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 4,643 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	72,875	18,965	23,608	27,442	32,260	33,785	36,226
Percent		26.0%	32.4%	37.7%	44.3%	46.4%	49.7%
White	37,537	3,228	4,872	6,240	8,401	8,988	10,364
Percent		8.6%	13.0%	16.6%	22.4%	23.9%	27.6%
African-American and Other	35,338	15,737	18,736	21,202	23,859	24,797	25,862
Percent		44.5%	53.0%	60.0%	67.5%	70.2%	73.2%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 13.1% of households did not have a car; 5.0% of Whites and 30.8% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 6.5% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 11.3% of households had no phone.

Income: The mean income of families with children in 1989 was $36,289; in 1979, it had been $33,373, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 21.9%.

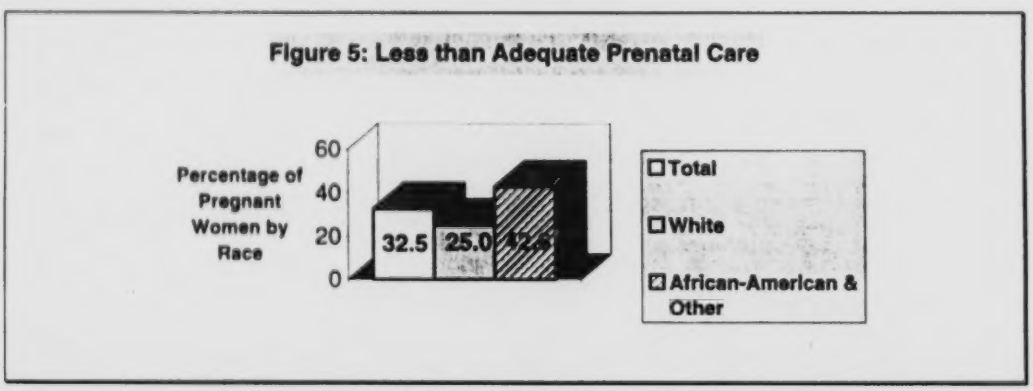
The mean income of single-parent families with children was $14,694 in 1989, as compared with $44,830 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 4,211 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 28.7% had child support court orders. The average monthly payment of child support was $150.78, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 726 parents in non-AFDC families were obligated to pay a monthly average of $249.14. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 991 or 21.8% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 1,481 or 32.5% of pregnant women received less than adequate prenatal care: 651 or 25.0% of Whites and 830 or 42.6% of African-Americans and Others. In that same year, 69 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 421 or 9.2% of all babies in the county were born with low birthweight. Over 12.0% of African-American babies and 7.2% of White babies were born with low birthweight. During 1992-94, approximately 270 or 1.8% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 17.1%. For Whites, the rate decreased by 24.9%, while for African-Americans and Others, the rate decreased by 13.3%. Over the three-year period 1992-94, 53 White and 118 African-American and Other infants died before age one. By comparison, 77 White and 147 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 15 White and 46 African-American and Other children ages 1-14 died in the county. During 1982-84, 39 White and 23 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 60.4% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 35.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 2,769 to 4,154 youth ages 13-19 in the county were infected with a STD. In the county, there were 35 reported cases of children under age 15 and 315 youth ages 15 - 19 infected with gonorrhea; 8 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 13.3% first smoked by age 11, 29.9% by age 13, and 40.5% by age 15. In a typical month, 15.5% of 7th and 8th graders and 21.3% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 35.1% of White 7th to 12th graders used cigarettes, in comparison with 6.5% African-Americans. A smaller but significant group of high school students (4.1%) used smokeless tobacco monthly; it was used primarily by White males (16.3%) compared with 0.6% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 7,563 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 2,290 students in grades 1-12 with learning disabilities and 805 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 4,702 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 11,193 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 58 nurses; 16 are currently available.

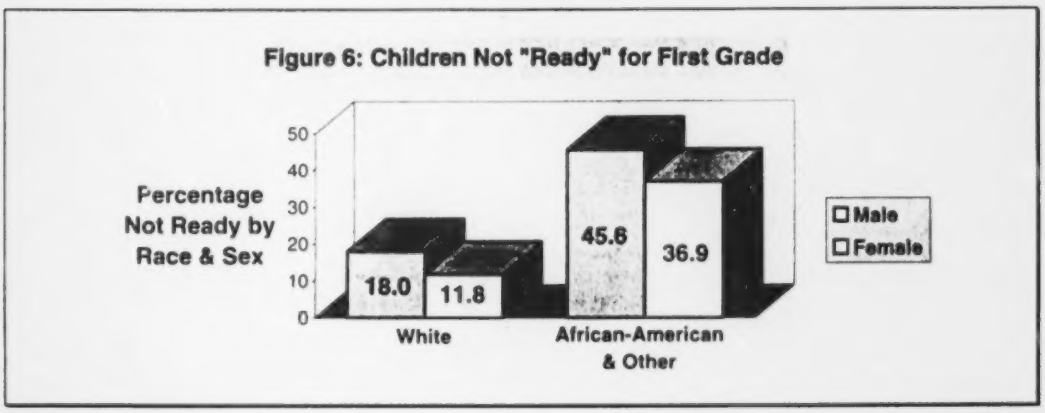
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 19.8% for Whites and 26.6% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

1,218 children not ready	31.0% children not ready

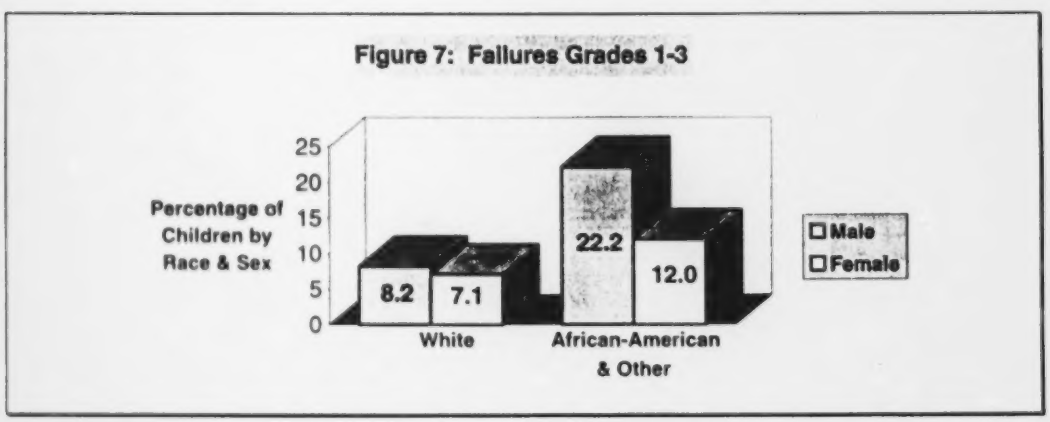


1st Grade Failures in 1995:

313 children failing	7.3% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

559 children failing	13.6% children failing



Overage for Grade 3 in 1996:

621 children overage	18.1% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 962 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 12.6% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 31.0% assessed not ready for the 1st grade, 18.1% overage in grade 3, and 12.6% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

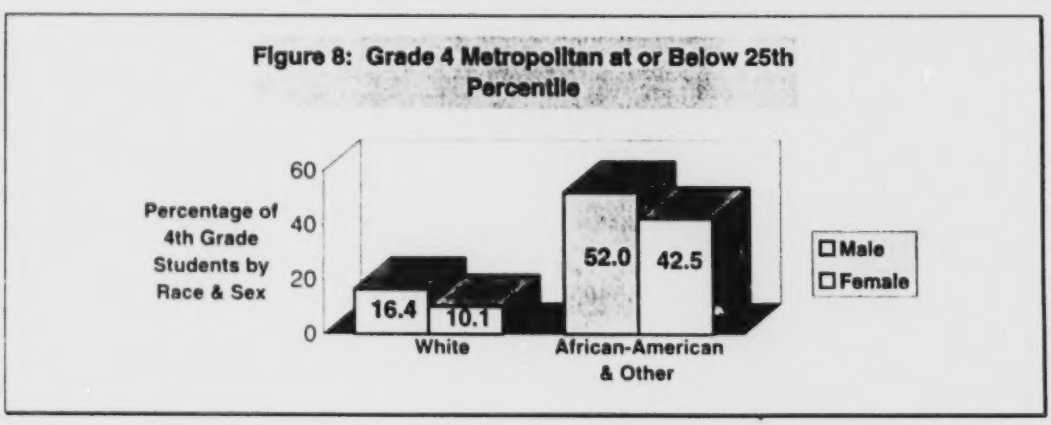
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 805 speech and language impaired, 2,290 learning disabled, 534 emotionally disabled, 845 mentally impaired, and 362 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 12.3% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996
(i.e. below 75% of students nationwide)

1132 children at or below 25th percentile	33.8% children at or below 25th percentile



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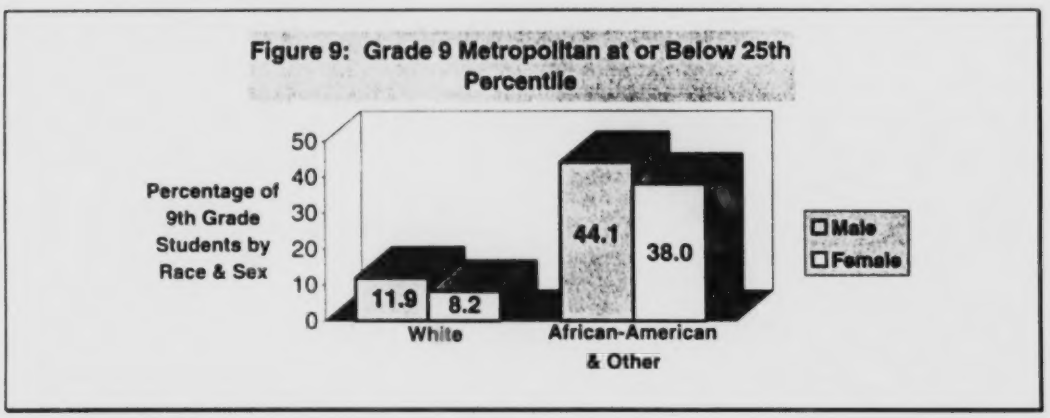
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	1,147	39.6	835	28.8
White Males	102	17.3	85	14.4
White Females	116	20.5	54	9.6
African-American & Other Males	391	50.7	327	42.4
African-American & Other Females	534	55.5	365	37.8

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

887 students at or below 25th percentile

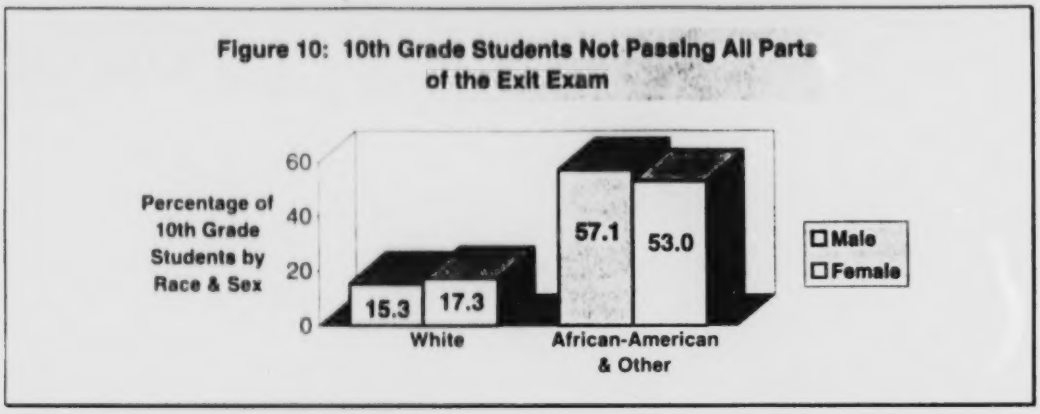
28.7% students at or below 25th percentile



Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

876 students not passing all parts

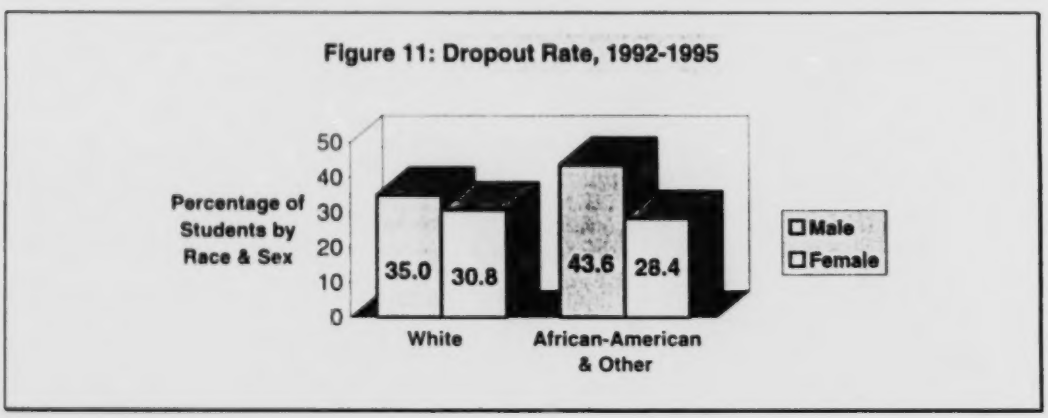
38.8% students not passing all parts



Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 64.0% to 23.5% in math and from 52.4% to 19.2% in reading. During the 1990s the trend altered, with 39.6% not meeting 8th grade math standards in 1996 and 28.8% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 19.9% in 1983 on the CTBS, 30.1% in 1990 on the Stanford, and 34.7% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 24.8% in 1990 and 28.5% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

4,119 students drop out **34.6% students drop out**



Dropouts: A distressing number of students drop out and fail to graduate. An average 44.1% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 41.7% during 1985-89, and 41.4% during 1990-94. During the 1995-96 period, 93.9% of all who did graduate received the State High School Diploma, while 1.6% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 4.5% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 215 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 319 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 15.3% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 28.7% to 39.6%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 1,431 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 8.1% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

4.8%	White Males	8.7%	African-American & Other Males
6.4%	White Females	15.1%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 405 girls between the ages of 14 and 17 became pregnant in 1993 and 398 in 1994. In 1994, this represented 5.2% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 3.0% for Whites and 7.9% for African-Americans and others. Of all pregnancies to 14-17 year olds, 64.3% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 17.1%.

Alcohol Use: In 1992-93, 26.4% of 7th and 8th graders and 38.9% of high schoolers said they had used alcohol in the past month. Of White males, 43.0% had used it in the past month, compared with 32.9% of African-American males; likewise, 41.8% of White females said they had used alcohol, compared with 22.4% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 18.6% had used alcohol by age 11 or younger, 39.8% by age 13, and 60.8% by age 15.

During the previous year, 32.8% of 7th and 8th graders and 39.0% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 25.7% said they had driven after drinking, and 9.6% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 66.9% of eighth graders and 87.0% of seniors felt that beer was easy to get; 56.4% of eighth graders and 48.7% of seniors felt there was not a great risk in using it regularly.

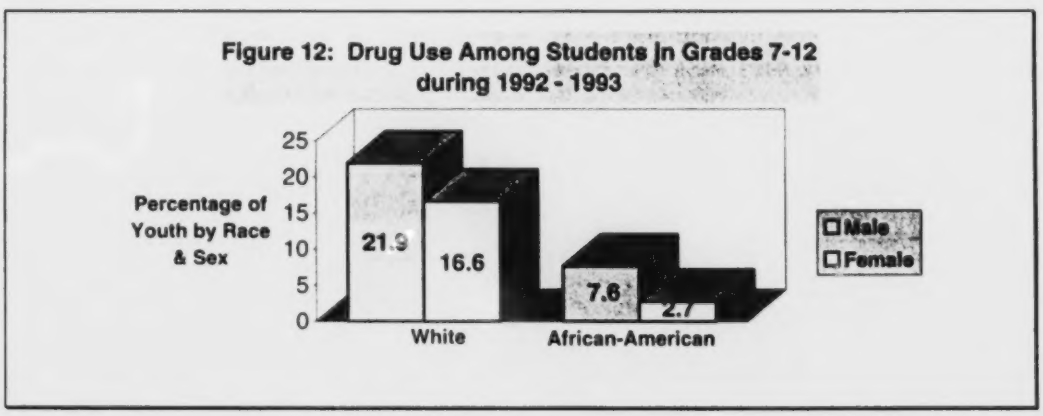
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high-school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 27.3% of all high school students in 1992-93 responded 3 or more drinks at a time; 14.5% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 6.6% of 7th and 8th graders and 14.2% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (21.9%) and White females (16.6%); use among African-American males was 7.6%; African-American females, 2.7%. Some young people first used drugs at an early age: among students 15 and older, 3.4% experienced their first use by age 11 or sooner; 9.3% had used a drug by age 13, and 18.2% by age 15.

Of seniors who had initiated use of marijuana, 11.1% had started use at home, 41.5% at a friend's home, and 47.4% elsewhere. During the past year, 5.2% of all high school students said that they used marijuana at home, 11.0% at a friend's house, and 7.8% in a car. In the past year, 7.0% of all high school students who drive and 10.3% of seniors who drive said that they had driven after using drugs . Furthermore, 7.6% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 40.5% of 8th graders who had an opinion said it is easy to get marijuana and 33.4% said it is easy to get cocaine or crack; 79.5% of seniors who had an opinion said it is easy to get marijuana and 67.8% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 23.0% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 2,059 individual juvenile offenders in the county were referred to the Solicitor; of these, 13.2% were age 12 or younger, 32.5% were 13 or 14, and 54.3% were 15 or older.

Of the referrals to the family court, 12.4% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 361 juvenile cases constituting 11.0% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

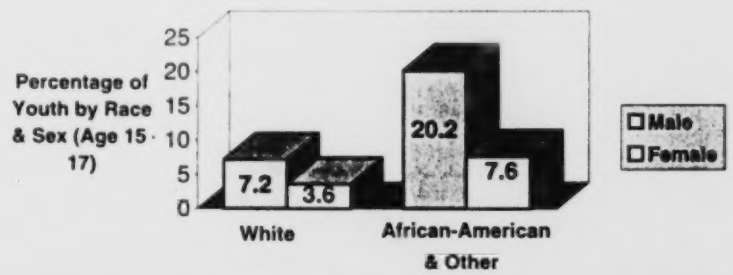
Delinquents are likely to live in families with low income: 41.4% lived in families with income under $10,000, 31.8% with $10,000-$19,999 and 26.8% with $20,000 or more. Furthermore, only 17.6% of delinquents lived with both natural parents, while 56.0% lived in a single parent household and 26.4% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 37.6% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 40.5% had at least one prior referral and 19.6% had been referred to court 3 times or more.

In 1994-95, there were 45 juvenile commitments from the county to State institutions.

During 1994-95, 1,107 youth ages 15 to 17 were referred to the family courts. In the county, 9.0% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.

Figure 13: Court Referrals



Deaths: During 1990-94, 88 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 24 deaths between 1990 and 1994; homicides killed 20 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 30.0% of children in single-parent families, 26.0% in poverty, 34.6% dropping out of school, 38.9% of high school students using alcohol and 23.0% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

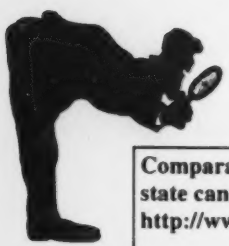
This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

Dr. A. Baron Holmes (803-734-2291) E-mail bholmes@ogc.state.sc.us
-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.



Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

CHARLESTON

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	259	5.7	7.3	0.78	5	1994
Births to Mothers Not Completing High School	849	18.6	21.8	0.85	7	1994
Births to Single Mothers	1,404	30.8	30.4	1.01	13	1994
Children in Single-Parent Families	18,953	30.0	25.1	1.20	31	1990
Parents Working	21,075	71.7	74.3	0.97	10	1990
Abuse & Neglect Victims	774	1.1	1.0	1.10	28	1995-96
Separation from Parents	3,521	4.8	5.1	0.94	14	1990
Economic Status						
Poor Children	18,965	26.0	21.0	1.24	26	1989
Mean Income of Families with Children	$36,289	NA	NA	1.02	11	1989
Health						
Less than Adequate Prenatal Care	1,481	32.5	32.0	1.02	23	1994
Low Birth Weight	421	9.2	9.2	1.00	20	1994
Not Adequately Immunized	1,922	35.0	18.0	1.94	46	1995
Cigarette Smokers (High School)	1,820	21.3	23.1	0.92	24	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	1,218	31.0	28.1	1.10	30	1994-95
1st Grade Failures	313	7.3	6.8	1.07	23	1994-95
Failures grades 1-3 (approx. %)	559	13.6	11.3	1.20	27	1994-95
Overage for Grade 3	621	18.1	16.2	1.12	28	1995-96
Special Education (ages 8 and 9)	962	12.6	15.3	0.82	11	1995-96
School Achievement						
Special Education Grades 1 - 12	4,836	12.3	13.0	0.95	12	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	1132	33.8	27.9	1.21	26	1995-96
Grade 8 BSAP - Math (Below standards)	1,147	39.6	34.8	1.14	24	1995-96
Grade 8 BSAP - Reading (Below standards)	835	28.8	28.8	1.00	16	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	887	28.7	29.5	0.97	15	1995-96
Exit Exam (Not passing all parts on 1st attempt)	876	38.8	35.3	1.10	23	1995-96
Dropout Rate	4,119	34.6	27.3	1.27	38	1992-95
25-34 Year olds with no HS Degree or GED	8,902	15.3	19.1	0.80	7	1990
Adolescent Risk Behavior						
Not in School or Employed	1,431	8.1	9.6	0.84	7	1990
Pregnancy (Ages 14 - 17)	398	5.2	4.8	1.08	26	1994
Alcohol Use (High School)	3,323	38.9	37.4	1.04	32	1992-93
Drug Use (High School)	1,213	14.2	12.8	1.11	39	1992-93
Binge Drinking (5 or more drinks)	1,239	14.5	16.3	0.89	20	1992-93
Delinquency (ages 15 - 17)	1,107	9.0	6.4	1.41	40	1994-95

* 1 = "best" 46 = "worst"

CHARLESTON TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	329	6.0	0.91	1992	286	5.6	0.85	1993	259	5.7	0.78	1994
Births to Mothers Not Completing High School	1,148	21.1	0.89	1992	1,031	20.3	0.91	1993	849	18.6	0.85	1994
Births to Single Mothers	1,724	31.7	1.05	1992	1,562	30.7	1.01	1993	1,404	30.8	1.01	1994
Children in Single-Parent Families		19.3	1.33	1970		24.9	1.32	1980	18,953	30.0	1.20	1990
Economic Status												
Poor Children		30.0	1.05	1969		24.0	1.13	1979	18,965	26.0	1.24	1989
Mean Income of Families with Children					33,373	N/A	0.99	1979	36,289	N/A	0.98	1989
Health												
Less than Adequate Prenatal Care	2,362	43.4	1.10	1992	1,892	37.2	1.05	1993	1,481	32.5	1.02	1994
Low Birth Weight	490	9.0	1.00	1992	489	9.6	1.03	1993	421	9.2	1.00	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	1,345	29.1	1.09	1990-91	1,248	29.5	1.06	1992-93	1,218	31.0	1.10	1994-95
1st Grade Failures	266	5.9	0.66	1991-92	448	11.9	1.23	1992-93	313	7.3	1.07	1994-95
Failures Grades 1-3 (approx. %)	421	9.8	0.70	1991-92	709	19.8	1.38	1992-93	559	13.6	1.20	1994-95
Overage for Grade 3	1,084	28.3	1.09	1991-92	846	22.9	1.12	1993-94	621	18.1	1.12	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	649	18.4	0.95	1991-92	781	22.4	1.13	1993-94	1,132	33.8	1.21	1995-96*
Grade 8 BSAP - Math (Below Standards)	664	23.2	0.86	1991-92	1,118	36.4	1.18	1993-94	1,147	39.6	1.14	1995-96
Grade 8 BSAP - Reading (Below Standards)	590	20.7	0.85	1991-92	834	27.3	0.95	1993-94	835	28.8	1.00	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	467	15.7	0.72	1991-92	658	21.6	0.89	1993-94	887	28.7	0.97	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	602	30.0	0.96	1991-92	622	30.1	0.92	1993-94	876	38.8	1.10	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	453	5.7	1.21	1992	405	5.1	1.13	1993	398	5.2	1.08	1994
Alcohol Use (High School)	3,311	46.3	1.15	1989-90					3,323	38.9	1.04	1992-93
Drug Use (High School)	1,085	15.2	1.13	1989-90					1,213	14.2	1.11	1992-93
Binge Drinking (5 or more drinks)		15.3	0.98	1989-90					1,239	14.5	0.89	1992-93

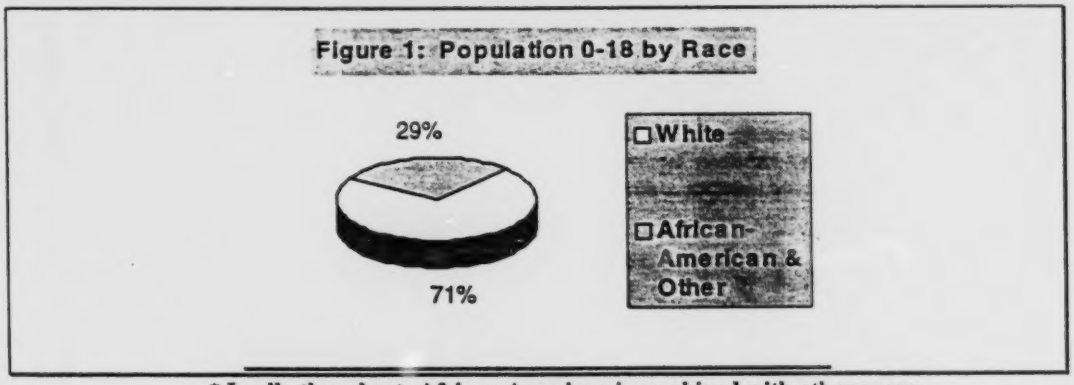
SOUTH CAROLINA kids count

1996 Report CHEROKEE

DEMOGRAPHICS

In 1994, there were 12,130 children under age 18 in the county. Of these, 8,590 were White and 3,530 were African-American and Other races. There were 12,700 children under age 18 in 1980, 13,105 in 1970, and 14,097 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 26.0% of the population in 1994, down from 40.0% in 1960, 35.6% in 1970 and 31.0% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 34.9% of all households in 1990, as compared with 47.0% of households in 1960, had children below the age of 18.

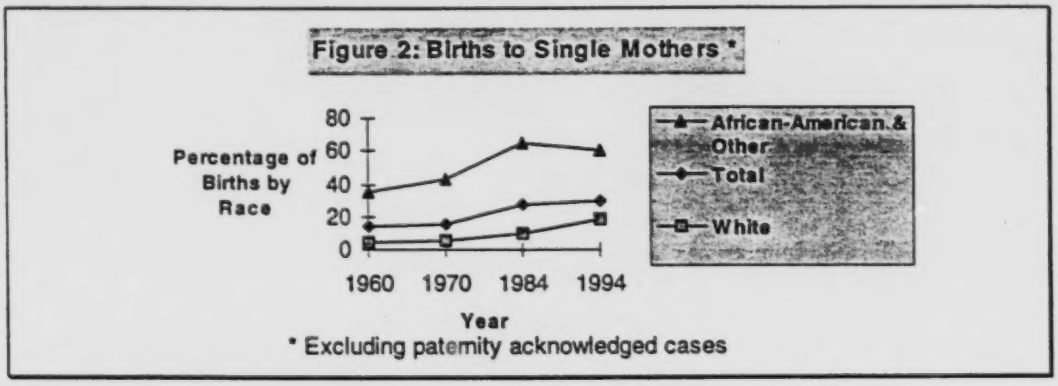
Births to Teen Mothers: In 1994, 70 babies were born to mothers younger than age 18. These babies were 11.0% of all children born in the county; 7.6% of all White babies and 21.0% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 64.3% were born to single mothers.

In 1994, 154 babies were born to mothers younger than age 20. These babies were 24.3% of all children born in the county; 20.1% of all White babies and 36.4% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 55.2% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 200 babies, 31.5% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 55.8% in 1970.

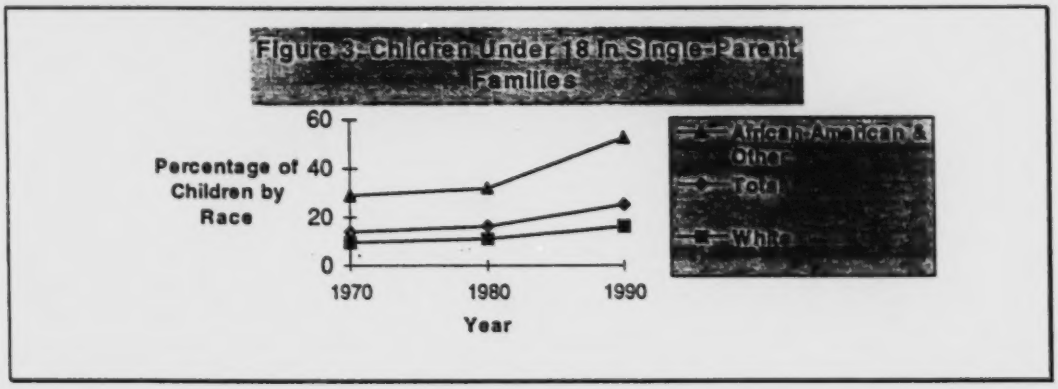
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 186 babies, 29.3% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 26.9% and in 1960 it was 13.9%. In 1994, 18.6% of White children and 60.5% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 86 babies, 13.6% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 272, constituting 42.9% of all babies, 30.3% of White babies, and 79.6% of African-American and Others.



Divorce Rate: In 1994, 2,571 marriage licenses were issued, while 293 divorce decrees involving 246 children were filed. In 1970 only 57 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 2,516 children lived with only one parent. This was 25.3% of all children, up from 16.0% in 1980 and 14.0% in 1970. In 1990, 16.0% of White children and 52.5% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 70.3% of mothers with children under 6 and 81.9% with children 6 - 17 were in the labor force. This has increased substantially from 47.0% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 951 children investigated as alleged child abuse and neglect victims: 35.6% for physical abuse, 15.4% for sexual abuse, 64.0% for neglect, and 17.6% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 193 children were victims of abuse and neglect: of these 45.6% were male and 54.4% were female; 66.3% were White, and 33.7% were African-American and Other. By age, 44.0% were 0 - 5, 42.5% were 6 - 12, and 13.5% were 13 - 17. They constituted 1.6% of all children age 18 or younger; 1.5% of all Whites and 1.8% of all African-Americans and Others. In the verified cases, 30.6% of abused and neglected children lived in two parent families, 55.4% in single parent families, 3.6% with extended families, and 10.4% in other circumstances.

Family Violence: In 1994, 355 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 31.0% of all assaults, which include both simple and aggravated assaults. Overall, 62.5% of all domestic assaults involve spouse abuse (constituting 19.4% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 5.8% of all children did not live with their natural parents; of these, 477 or 4.1% of children lived with relatives, 189 or 1.6% lived with non-relatives, and 13 were in institutional facilities.

Out of Home Placements: As of September 30, 1996, 48 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 10.4% 0-2, 18.8% 3-5, 31.3% 6-10, 8.3% 11-13, and 31.3% 14 and above. The foster care population is comprised of 45.8% males and 54.2% females. Regarding their future, 27.1% were under a plan for placement in adoptive homes, 39.6% for return to a parent or guardian, 8.3% for placement with a relative, 18.8% for independent living, 6.3% for permanent foster care, and 0.0% for other circumstances.

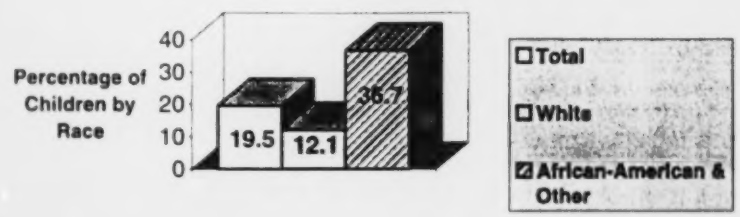
Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.85 adults for every person below age 18. This was up substantially from 1960, when there were only 1.5 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 2,242 children and youth under the age of 18 lived in families with incomes below poverty. Over 19.5% of all children and youth lived below poverty: 12.1% of Whites and 36.7% of African-Americans and others.

Figure 4: Children Living in Poverty



Poverty has always been a serious problem. While the rate among children under age 18 was 19.5% in 1989, it was 17.2% in 1979 and 21.3% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 22.7% of children 0 - 5 and 18.0% of children 6 - 17 lived in poverty; 23.9% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 48.3% of children in single-parent families lived in poverty, but only 6.6% of children in married-couple families were poor. Children in single-parent families made up 74.7% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 2,834 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 592 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	11,512	2,242	2,834	3,609	4,492	4,931	5,559
Percent		19.5%	24.6%	31.3%	39.0%	42.8%	48.3%
White	8,054	973	1,293	1,734	2,242	2,473	2,872
Percent		12.1%	16.1%	21.5%	27.8%	30.7%	35.7%
African-American and Other	3,458	1,269	1,541	1,875	2,250	2,458	2,687
Percent		36.7%	44.6%	54.2%	65.1%	71.1%	77.7%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 12.8% of households did not have a car; 8.9% of Whites and 30.4% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 11.3% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 29.2% of households had no phone.

Income: The mean income of families with children in 1989 was $31,140; in 1979, it had been $32,866, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by -0.6%.

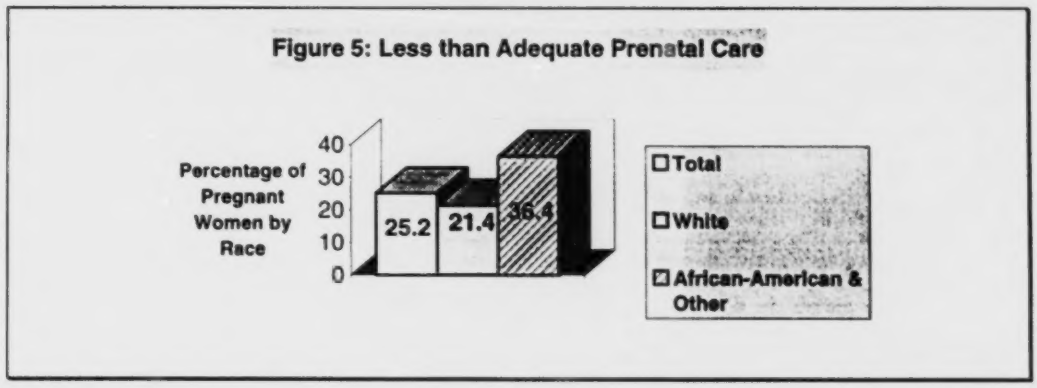
The mean income of single-parent families with children was $14,730 in 1989, as compared with $36,941 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 534 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 50.0% had child support court orders. The average monthly payment of child support was $157.28, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 437 parents in non-AFDC families were obligated to pay a monthly average of $174.78. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 143 or 22.6% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 160 or 25.2% of pregnant women received less than adequate prenatal care: 101 or 21.4% of Whites and 59 or 36.4% of African-Americans and Others. In that same year, 7 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 60 or 9.5% of all babies in the county were born with low birthweight. Over 11.7% of African-American babies and 8.7% of White babies were born with low birthweight. During 1992-94, approximately 30 or 1.5% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 6.4%. For Whites, the rate increased by 3.9%, while for African-Americans and Others, the rate decreased by 11.3%. Over the three-year period 1992-94, 11 White and 9 African-American and Other infants died before age one. By comparison, 9 White and 10 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 7 White and 4 African-American and Other children ages 1-14 died in the county. During 1982-84, 8 White and 1 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 49.7% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 24.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 497 to 746 youth ages 13-19 in the county were infected with a STD. In the county, there were 5 reported cases of children under age 15 and 48 youth ages 15 - 19 infected with gonorrhea; 1 youth ages 15 - 19 was reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 15.8% first smoked by age 11, 36.5% by age 13, and 51.1% by age 15. In a typical month, 24.5% of 7th and 8th graders and 31.8% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 36.4% of White 7th to 12th graders used cigarettes, in comparison with 11.9% African-Americans. A smaller but significant group of high school students (14.0%) used smokeless tobacco monthly; it was used primarily by White males (36.9%) compared with 1.4% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 1,213 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 344 students in grades 1-12 with learning disabilities and 258 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 815 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 1,795 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 11 nurses; 6 are currently available.

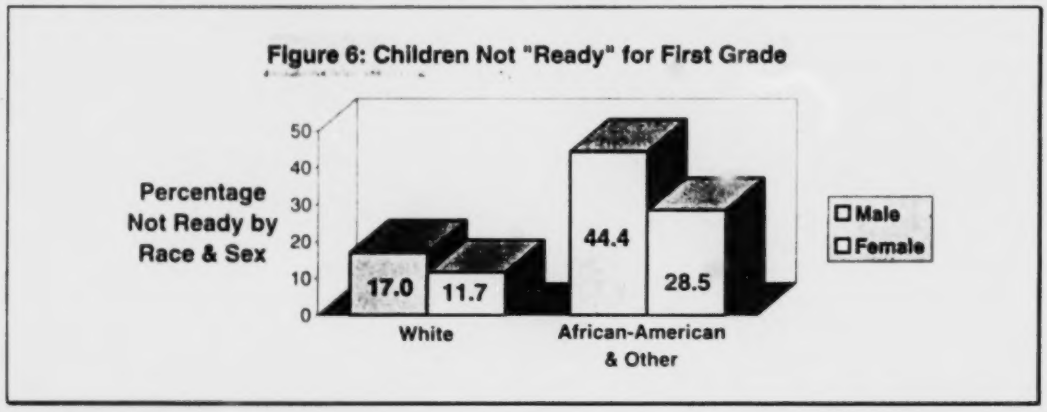
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 41.0% for Whites and 45.3% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

156 children not ready	21.1% children not ready

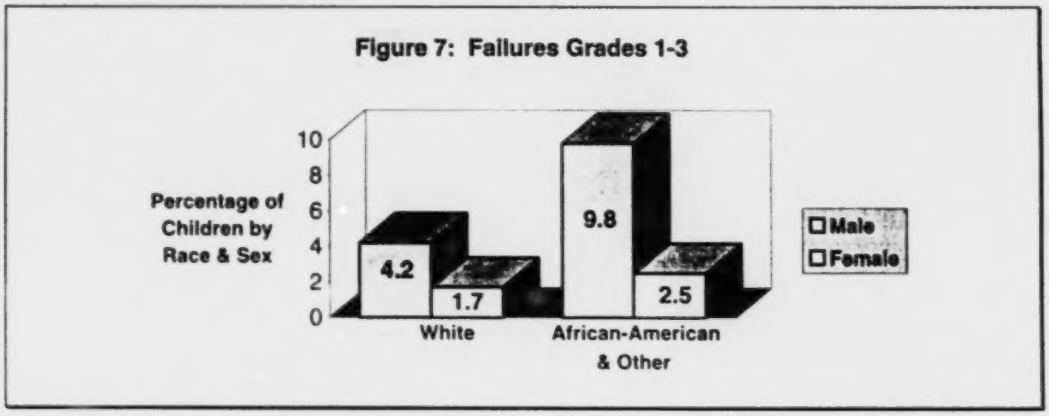


1st Grade Failures in 1995:

12 children failing	1.7% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

28 children failing	4.0% children failing



Overage for Grade 3 in 1996:

38 children overage	5.6% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 150 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 10.8% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 21.1% assessed not ready for the 1st grade, 5.6% overage in grade 3, and 10.8% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

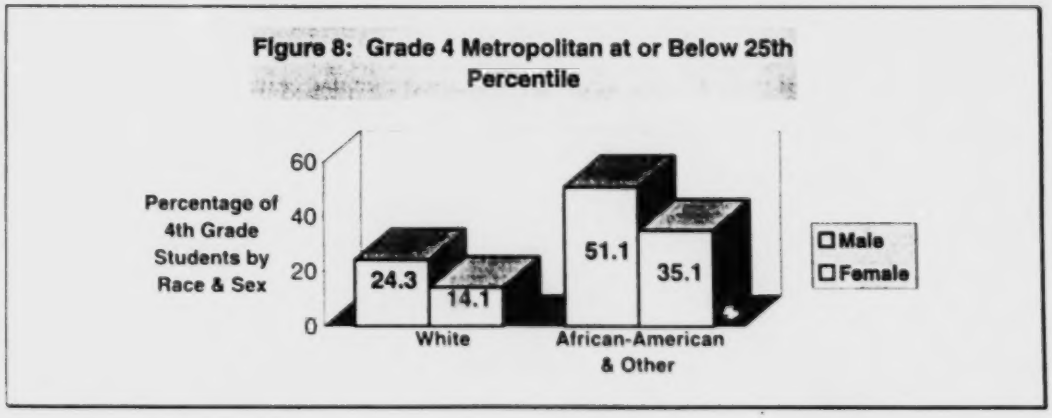
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 258 speech and language impaired, 344 learning disabled, 30 emotionally disabled, 85 mentally impaired, and 25 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 10.0% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996
(i.e. below 75% of students nationwide)

153 children at or below 25th percentile	26.2% children at or below 25th percentile



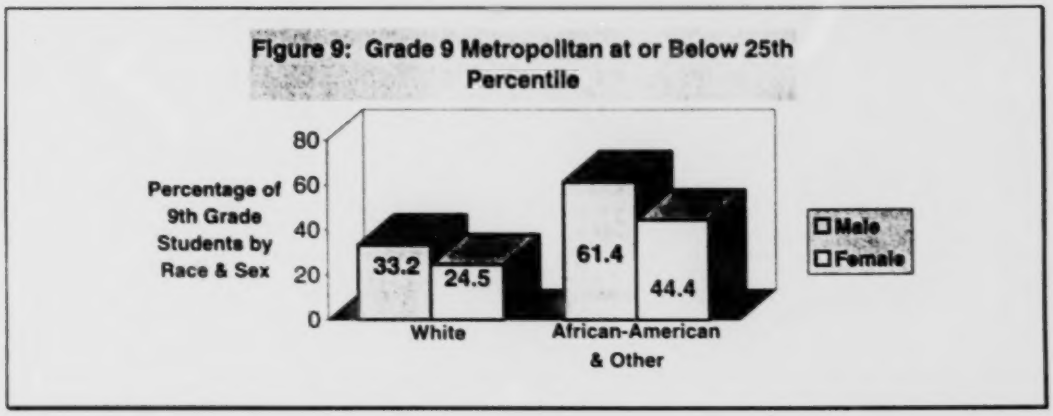
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	271	44.2	223	36.4
White Males	90	37.7	79	32.9
White Females	66	35.7	44	23.8
African-American & Other Males	51	60.7	48	57.8
African-American & Other Females	63	60.6	52	50.0

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

225 students at or below 25th percentile

36.6% students at or below 25th percentile

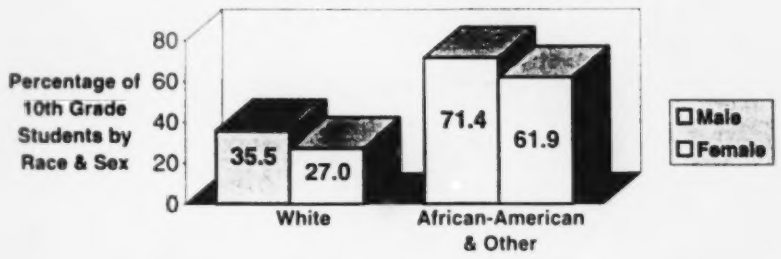


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

224 students not passing all parts

41.2% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam

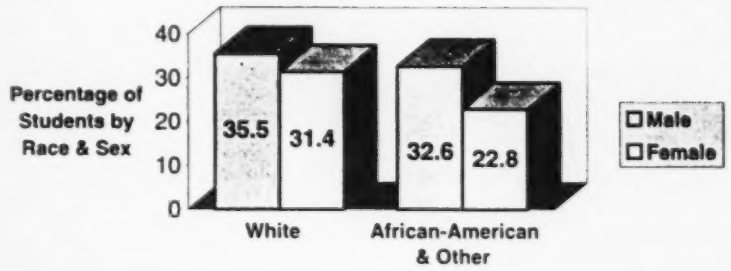


Achievement Trends: **How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 58.0% to 47.6% in math and from 57.3% to 30.9% in reading. During the 1990s the trend altered, with 44.2% not meeting 8th grade math standards in 1996 and 36.4% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 34.3% in 1983 on the CTBS, 32.6% in 1990 on the Stanford, and 28.2% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 37.1% in 1990 and 36.2% in 1995.**

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

867 students drop out **31.8% students drop out**

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 36.7% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 37.7% during 1985-89, and 38.2% during 1990-94. During the 1995-96 period, 93.6% of all who did graduate received the State High School Diploma, while 3.4% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 3.0% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 33 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 69 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 28.5% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 26.2% to 44.2%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 396 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 13.7% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

8.3%	White Males	16.6%	African-American & Other Males
14.0%	White Females	24.4%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 73 girls between the ages of 14 and 17 became pregnant in 1993 and 86 in 1994. In 1994, this represented 6.1% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 4.7% for Whites and 9.1% for African-Americans and others. Of all pregnancies to 14-17 year olds, 81.4% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 18.0%.

Alcohol Use: In 1992-93, 20.6% of 7th and 8th graders and 36.1% of high schoolers said they had used alcohol in the past month. Of White males, 33.1% had used it in the past month, compared with 33.3% of African-American males; likewise, 29.5% of White females said they had used alcohol, compared with 22.9% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 13.2% had used alcohol by age 11 or younger, 34.0% by age 13, and 57.3% by age 15.

During the previous year, 36.0% of 7th and 8th graders and 43.9% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 34.2% said they had driven after drinking, and 10.4% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 57.9% of eighth graders and 86.2% of seniors felt that beer was easy to get; 49.2% of eighth graders and 46.6% of seniors felt there was not a great risk in using it regularly.

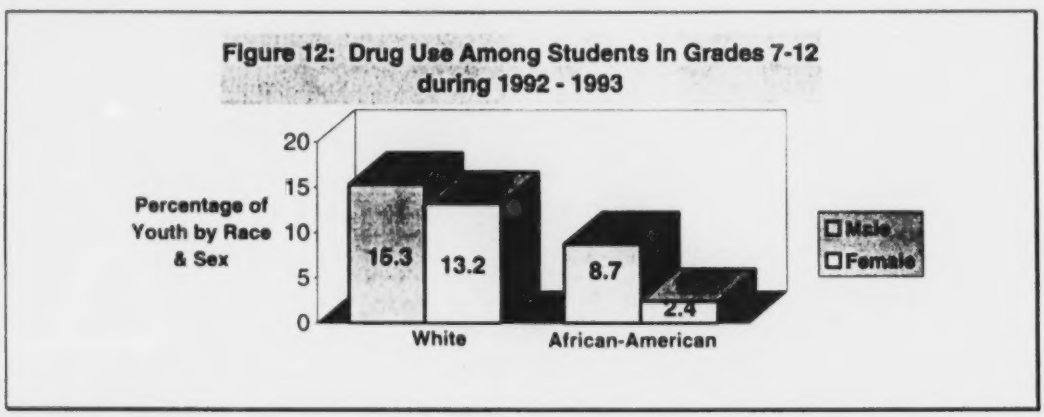
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 29.5% of all high school students in 1992-93 responded 3 or more drinks at a time; 18.1% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 6.4% of 7th and 8th graders and 14.7% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (15.3%) and White females (13.2%); use among African-American males was 8.7%; African-American females, 2.4%. Some young people first used drugs at an early age: among students 15 and older, 3.4% experienced their first use by age 11 or sooner; 10.4% had used a drug by age 13, and 21.2% by age 15.

Of seniors who had initiated use of marijuana, 9.4% had started use at home, 47.8% at a friend's home, and 42.8% elsewhere. During the past year, 4.1% of all high school students said that they used marijuana at home, 10.6% at a friend's house, and 7.4% in a car. In the past year, 7.5% of all high school students who drive and 12.7% of seniors who drive said that they had driven after using drugs . Furthermore, 9.5% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 24.6% of 8th graders who had an opinion said it is easy to get marijuana and 14.2% said it is easy to get cocaine or crack; 72.4% of seniors who had an opinion said it is easy to get marijuana and 45.8% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 23.8% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 285 individual juvenile offenders in the county were referred to the Solicitor; of these, 14.0% were age 12 or younger, 31.9% were 13 or 14, and 54.0% were 15 or older.

Of the referrals to the family court, 19.7% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 67 juvenile cases constituting 18.4% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

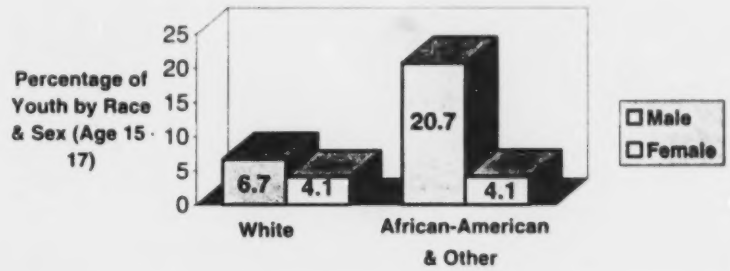
Delinquents are likely to live in families with low income: 45.2% lived in families with income under $10,000, 33.6% with $10,000-$19,999 and 21.2% with $20,000 or more. Furthermore, only 22.8% of delinquents lived with both natural parents, while 50.8% lived in a single parent household and 26.4% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 46.8% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 42.8% had at least one prior referral and 20.4% had been referred to court 3 times or more.

In 1994-95, there were 26 juvenile commitments from the county to State institutions.

During 1994-95, 154 youth ages 15 to 17 were referred to the family courts. In the county, 7.2% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.

Figure 13: Court Referrals



Deaths: During 1990-94, 15 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 6 deaths between 1990 and 1994; homicides killed 0 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 25.3% of children in single-parent families, 19.5% in poverty, 31.8% dropping out of school, 36.1% of high school students using alcohol and 23.8% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

CHEROKEE

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	70	11.0	7.3	1.51	39	1994
Births to Mothers Not Completing High School	200	31.5	21.8	1.44	42	1994
Births to Single Mothers	186	29.3	30.4	0.96	11	1994
Children in Single-Parent Families	2,516	25.3	25.1	1.01	18	1990
Parents Working	3,871	78.6	74.3	1.06	40	1990
Abuse & Neglect Victims	193	1.6	1.0	1.60	40	1995-96
Separation from Parents	679	5.8	5.1	1.14	24	1990
Economic Status						
Poor Children	2,242	19.5	21.0	0.93	15	1989
Mean Income of Families with Children	$31,140	NA	NA	0.88	25	1989
Health						
Less than Adequate Prenatal Care	160	25.2	32.0	0.79	6	1994
Low Birth Weight	60	9.5	9.2	1.03	24	1994
Not Adequately Immunized	251	24.0	18.0	1.33	43	1995
Cigarette Smokers (High School)	653	31.8	23.1	1.38	46	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	156	21.1	28.1	0.75	3	1994-95
1st Grade Failures	12	1.7	6.8	0.25	2	1994-95
Failures grades 1-3 (approx. %)	28	4.0	11.3	0.35	2	1994-95
Overage for Grade 3	38	5.6	16.2	0.35	1	1995-96
Special Education (ages 8 and 9)	150	10.8	15.3	0.71	2	1995-96
School Achievement						
Special Education Grades 1 - 12	742	10.0	13.0	0.77	2	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	153	26.2	27.9	0.94	17	1995-96
Grade 8 BSAP - Math (Below standards)	271	44.2	34.8	1.27	34	1995-96
Grade 8 BSAP - Reading (Below standards)	223	36.4	28.8	1.26	31	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	225	36.6	29.5	1.24	31	1995-96
Exit Exam (Not passing all parts on 1st attempt)	224	41.2	35.3	1.17	25	1995-96
Dropout Rate	867	31.8	27.3	1.16	33	1992-95
25-34 Year olds with no HS Degree or GED	1,955	28.5	19.1	1.49	37	1990
Adolescent Risk Behavior						
Not in School or Employed	396	13.7	9.6	1.43	40	1990
Pregnancy (Ages 14 - 17)	86	6.1	4.8	1.27	34	1994
Alcohol Use (High School)	741	36.1	37.4	0.97	24	1992-93
Drug Use (High School)	302	14.7	12.8	1.15	41	1992-93
Binge Drinking (5 or more drinks)	371	18.1	16.3	1.11	35	1992-93
Delinquency (ages 15 - 17)	154	7.2	6.4	1.13	30	1994-95

* 1 = "best" 46 = "worst"

CHEROKEE TRENDS

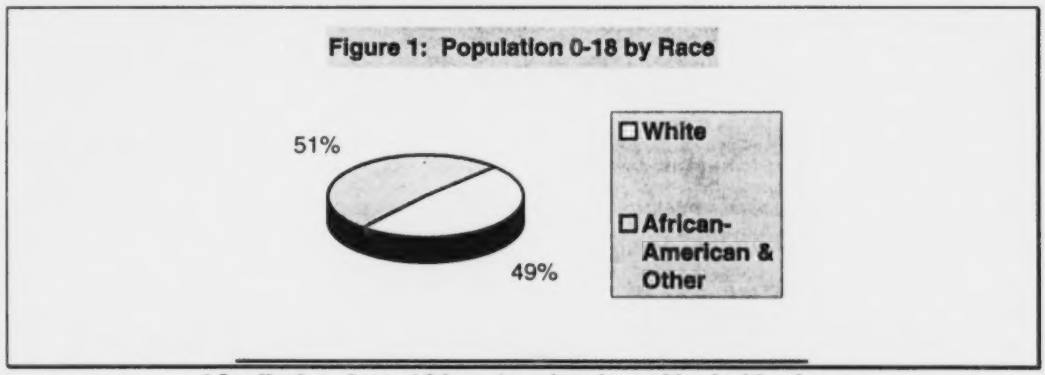
Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	63	9.3	1.41	1992	55	8.7	1.32	1993	70	11.0	1.51	1994
Births to Mothers Not Completing High School	225	33.0	1.40	1992	209	33.0	1.47	1993	200	31.5	1.44	1994
Births to Single Mothers	229	33.6	1.11	1992	216	34.1	1.13	1993	186	29.3	0.96	1994
Children in Single-Parent Families		14.0	0.97	1970		16.0	0.85	1980	2,516	25.3	1.01	1990
Economic Status												
Poor Children		21.3	0.74	1969		17.2	0.81	1979	2,242	19.5	0.93	1989
Mean Income of Families with Children					32,866	N/A	1.01	1979	31,140	N/A	1.14	1989
Health												
Less than Adequate Prenatal Care	217	31.9	0.81	1992	204	32.2	0.91	1993	160	25.2	0.79	1994
Low Birth Weight	67	9.8	1.09	1992	59	9.3	1.00	1993	60	9.5	1.03	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	146	22.6	0.85	1990-91	183	26.5	0.95	1992-93	156	21.1	0.75	1994-95
1st Grade Failures	27	4.3	0.48	1991-92	27	4.6	0.47	1992-93	12	1.7	0.25	1994-95
Failures Grades 1-3 (approx. %)	46	7.3	0.52	1991-92	41	7.1	0.50	1992-93	28	4.0	0.35	1994-95
Overage for Grade 3	118	19.0	0.73	1991-92	69	10.9	0.53	1993-94	38	5.6	0.35	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	123	20.0	1.04	1991-92	129	21.8	1.10	1993-94	153	26.2	0.94	1995-96*
Grade 8 BSAP - Math (Below Standards)	258	40.1	1.49	1991-92	260	41.7	1.35	1993-94	271	44.2	1.27	1995-96
Grade 8 BSAP - Reading (Below Standards)	231	36.3	1.49	1991-92	234	37.4	1.30	1993-94	223	36.4	1.26	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	174	26.2	1.20	1991-92	195	31.8	1.31	1993-94	225	36.6	1.24	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	238	42.9	1.38	1991-92	251	44.8	1.37	1993-94	224	41.2	1.17	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	74	5.3	1.13	1992	73	5.2	1.16	1993	86	6.1	1.27	1994
Alcohol Use (High School)	835	41.5	1.03	1989-90					741	36.1	0.97	1992-93
Drug Use (High School)	355	17.6	1.31	1989-90					302	14.7	1.15	1992-93
Binge Drinking (5 or more drinks)		20.6	1.32	1989-90					371	18.1	1.11	1992-93

1996 Report CHESTER

DEMOGRAPHICS

In 1994, there were 9,130 children under age 18 in the county. Of these, 4,450 were White and 4,680 were African-American and Other races. There were 9,354 children under age 18 in 1980, 10,979 in 1970, and 12,727 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 27.7% of the population in 1994, down from 41.2% in 1960, 36.8% in 1970 and 31.0% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 35.6% of all households in 1990, as compared with 44.0% of households in 1960, had children below the age of 18.

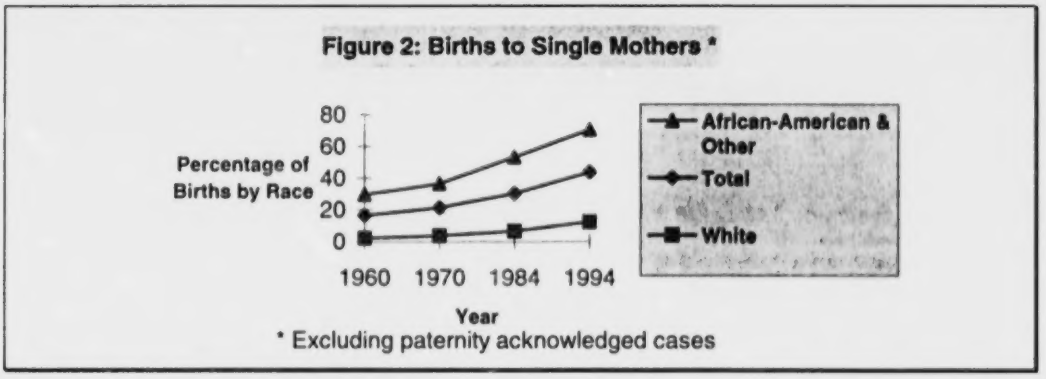
Births to Teen Mothers: In 1994, 62 babies were born to mothers younger than age 18. These babies were 13.5% of all children born in the county; 8.9% of all White babies and 17.6% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 82.3% were born to single mothers.

In 1994, 113 babies were born to mothers younger than age 20. These babies were 24.6% of all children born in the county; 17.8% of all White babies and 30.6% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 74.3% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 133 babies, 29.0% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 55.1% in 1970.

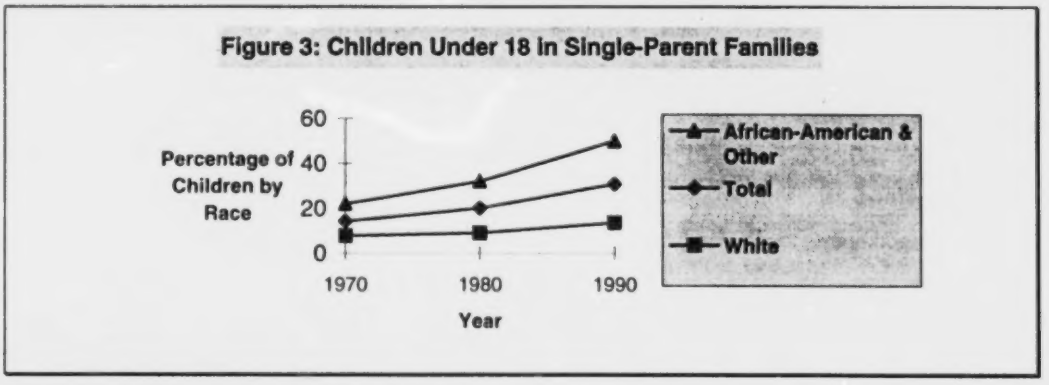
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 200 babies, 43.6% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 30.2% and in 1960 it was 16.4%. In 1994, 12.6% of White children and 70.6% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 27 babies, 5.9% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 227, constituting 49.5% of all babies, 19.6% of White babies, and 75.5% of African-American and Others.



Divorce Rate: In 1994, 260 marriage licenses were issued, while 113 divorce decrees involving 104 children were filed. In 1970 only 84 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 2,325 children lived with only one parent. This was 30.9% of all children, up from 20.1% in 1980 and 14.3% in 1970. In 1990, 13.7% of White children and 50.0% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 72.7% of mothers with children under 6 and 81.1% with children 6 - 17 were in the labor force. This has increased substantially from 44.0% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 427 children investigated as alleged child abuse and neglect victims: 31.6% for physical abuse, 8.4% for sexual abuse, 72.1% for neglect, and 24.6% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 104 children were victims of abuse and neglect: of these 38.0% were male and 62.0% were female; 47.6% were White, and 52.4% were African-American and Other. By age, 46.2% were 0 - 5, 38.5% were 6 - 12, and 15.4% were 13 - 17. They constituted 1.1% of all children age 18 or younger; 1.1% of all Whites and 1.2% of all African-Americans and Others. In the verified cases, 24.0% of abused and neglected children lived in two parent families, 43.3% in single parent families, 13.5% with extended families, and 19.2% in other circumstances.

Family Violence: In 1994, 322 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 28.0% of all assaults, which include both simple and aggravated assaults. Overall, 61.5% of all domestic assaults involve spouse abuse (constituting 17.1% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 3.3% of all children did not live with their natural parents; of these, 244 or 2.7% of children lived with relatives, 62 or 0.7% lived with non-relatives, and 0 were in institutional facilities.

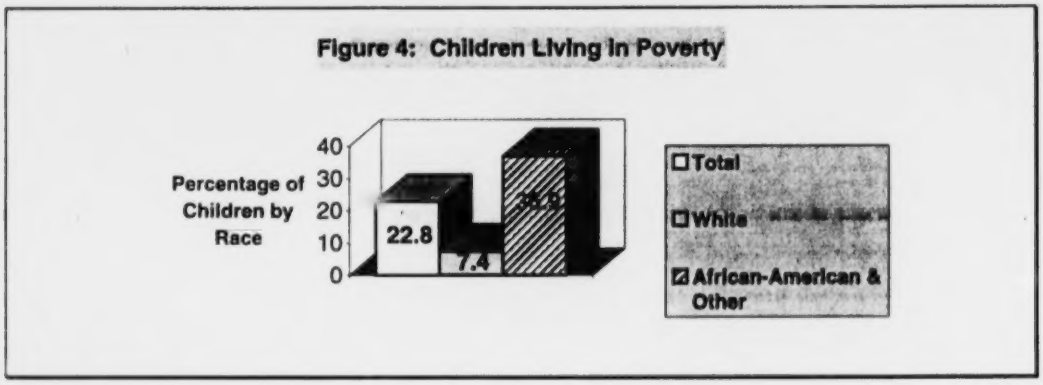
Out of Home Placements: As of September 30, 1996, 42 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 4.8% 0-2, 11.9% 3-5, 33.3% 6-10, 19.0% 11-13, and 31.0% 14 and above. The foster care population is comprised of 42.9% males and 57.1% females. Regarding their future, 40.5% were under a plan for placement in adoptive homes, 19.0% for return to a parent or guardian, 4.8% for placement with a relative, 28.6% for independent living, 4.8% for permanent foster care, and 2.4% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.61 adults for every person below age 18. This was up substantially from 1960, when there were only 1.43 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 2,078 children and youth under the age of 18 lived in families with incomes below poverty. Over 22.8% of all children and youth lived below poverty· 7.4% of Whites and 36.9% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 22.8% in 1989, it was 23.5% in 1979 and 32.0% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 27.9% of children 0 - 5 and 20.5% of children 6 - 17 lived in poverty; 22.7% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 47.7% of children in single-parent families lived in poverty, but only 7.8% of children in married-couple families were poor. Children in single-parent families made up 77.8% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 2,827 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 749 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	9,122	2,078	2,827	3,431	4,202	4,453	4,888
Percent		22.8%	31.0%	37.6%	46.1%	48.8%	53.6%
White	4,361	323	698	948	1,248	1,400	1,544
Percent		7.4%	16.0%	21.7%	28.6%	32.1%	35.4%
African-American and Other	4,761	1,755	2,129	2,483	2,954	3,053	3,344
Percent		36.9%	44.7%	52.2%	62.0%	64.1%	70.2%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 13.9% of households did not have a car; 7.2% of Whites and 26.6% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 8.7% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 21.9% of households had no phone.

Income: The mean income of families with children in 1989 was $30,656; in 1979, it had been $30,358, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 2.9%.

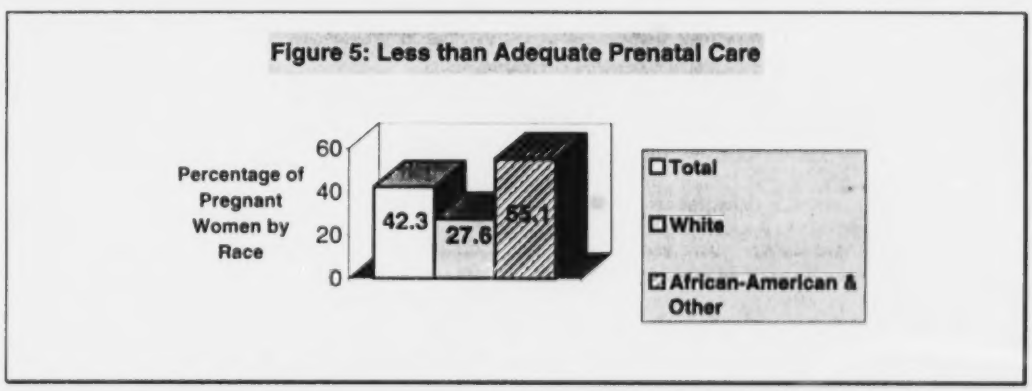
The mean income of single-parent families with children was $16,099 in 1989, as compared with $36,756 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 537 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 50.5% had child support court orders. The average monthly payment of child support was $152.95, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 400 parents in non-AFDC families were obligated to pay a monthly average of $158.07. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 167 or 36.4% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 194 or 42.3% of pregnant women received less than adequate prenatal care: 59 or 27.6% of Whites and 135 or 55.1% of African-Americans and Others. In that same year, 11 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 47 or 10.2% of all babies in the county were born with low birthweight. Over 15.1% of African-American babies and 4.7% of White babies were born with low birthweight. During 1992-94, approximately 27 or 1.8% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 42.0%. For Whites, the rate decreased by 58.4%, while for African-Americans and Others, the rate decreased by 32.9%. Over the three-year period 1992-94, 5 White and 14 African-American and Other infants died before age one. By comparison, 13 White and 22 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 2 White and 2 African-American and Other children ages 1-14 died in the county. During 1982-84, 6 White and 7 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 42.1% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 13.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 349 to 524 youth ages 13-19 in the county were infected with a STD. In the county, there were 2 reported cases of children under age 15 and 25 youth ages 15 - 19 infected with gonorrhea; 1 youth ages 15 - 19 was reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 12.7% first smoked by age 11, 26.2% by age 13, and 38.5% by age 15. In a typical month, 20.1% of 7th and 8th graders and 20.2% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 33.3% of White 7th to 12th graders used cigarettes, in comparison with 6.7% African-Americans. A smaller but significant group of high school students (5.7%) used smokeless tobacco monthly; it was used primarily by White males (19.4%) compared with 1.0% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 913 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 368 students in grades 1-12 with learning disabilities and 199 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 605 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 1,351 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 9 nurses; 3 are currently available.

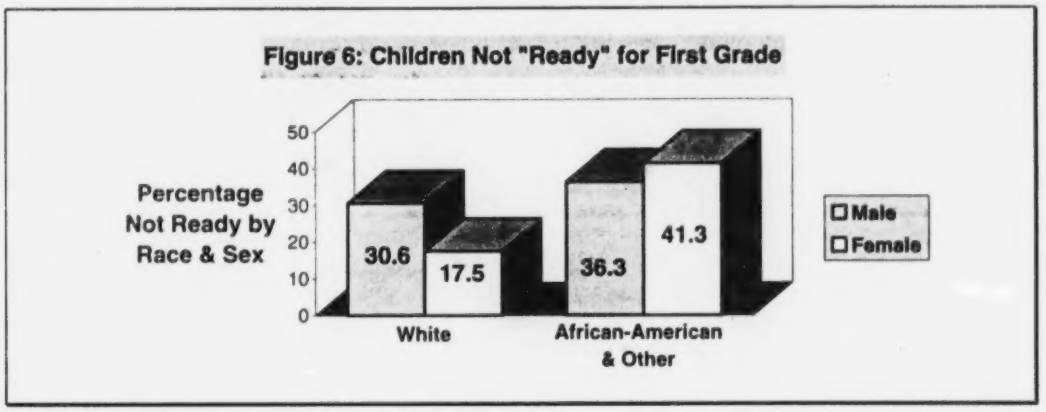
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 51.2% for Whites and 58.9% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

204 children not ready	32.6% children not ready

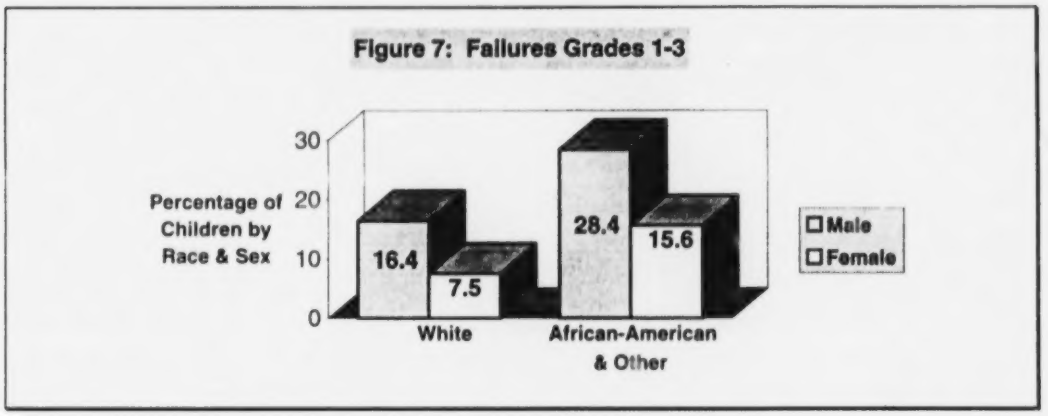


1st Grade Failures in 1995:

69 children failing	10.9% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

105 children failing	17.9% children failing



Overage for Grade 3 in 1996:

115 children overage	24.6% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 194 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 18.9% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 32.6% assessed not ready for the 1st grade, 24.6% overage in grade 3, and 18.9% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

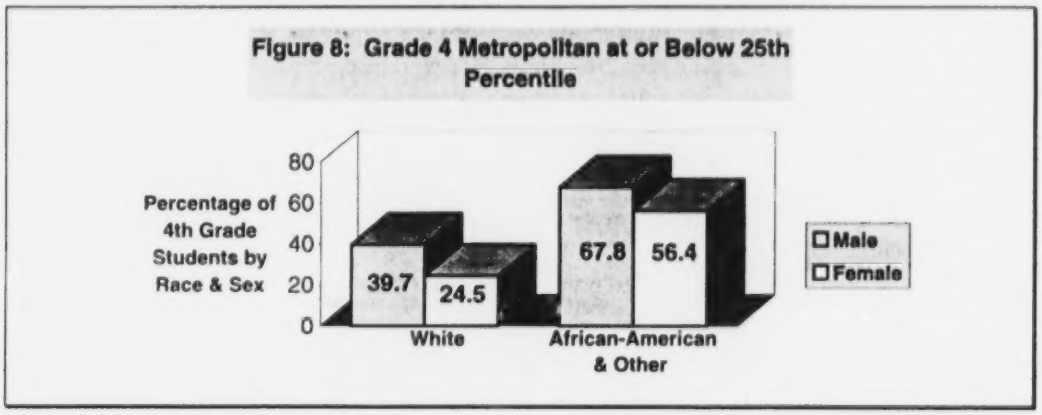
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 199 speech and language impaired, 368 learning disabled, 55 emotionally disabled, 183 mentally impaired, and 25 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 14.3% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

217 children at or below 25th percentile	48.2% children at or below 25th percentile



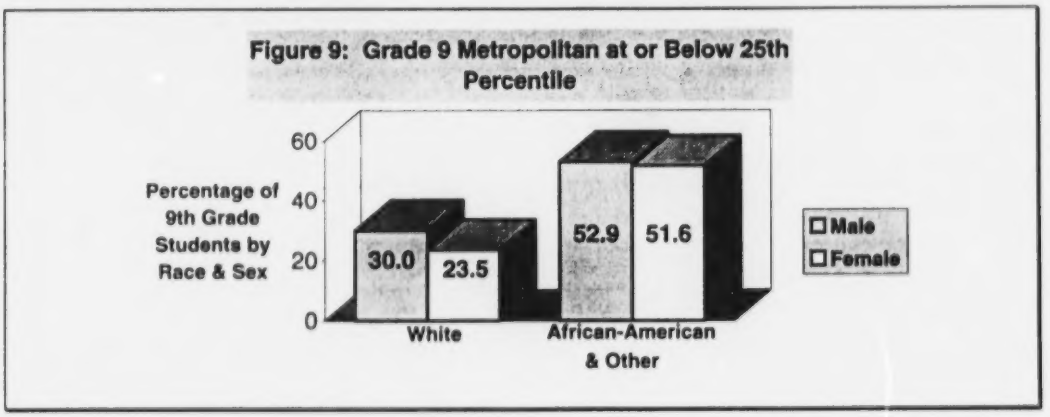
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	190	42.6	188	42.2
White Males	26	30.6	24	28.2
White Females	41	32.5	33	26.2
African-American & Other Males	62	55.4	71	63.4
African-American & Other Females	61	49.6	60	49.2

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

207 students at or below 25th percentile

39.0% students at or below 25th percentile

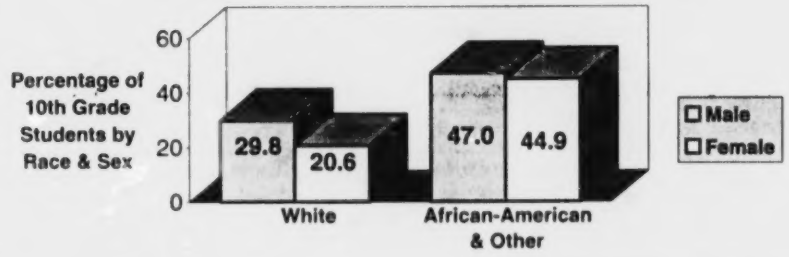


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

122 students not passing all parts

34.4% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



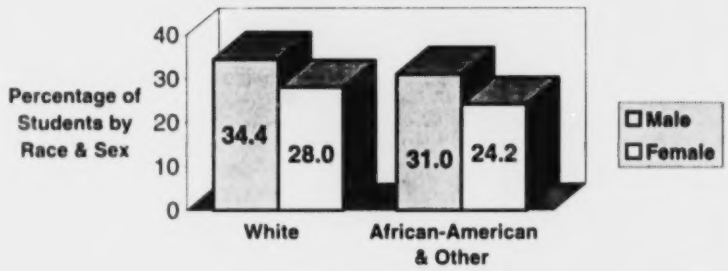
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 67.8% to 39.2% in math and from 61.1% to 32.6% in reading. During the 1990s the trend altered, with 42.6% not meeting 8th grade math standards in 1996 and 42.2% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 48.0% in 1983 on the CTBS, 43.4% in 1990 on the Stanford, and 49.8% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 49.7% in 1990 and 43.1% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

615 students drop out

29.6% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 35.8% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 27.7% during 1985-89, and 28.9% during 1990-94. During the 1995-96 period, 89.3% of all who did graduate received the State High School Diploma, while 6.3% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 4.4% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 32 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 53 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 26.0% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 29.6% to 48.2%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 230 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 10.9% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

10.1%	White Males	6.6%	African-American & Other Males
12.9%	White Females	14.0%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 55 girls between the ages of 14 and 17 became pregnant in 1993 and 72 in 1994. In 1994, this represented 7.5% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 4.9% for Whites and 10.0% for African-Americans and others. Of all pregnancies to 14-17 year olds, 84.7% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it increased by 23.8%.

Alcohol Use: In 1992-93, 27.1% of 7th and 8th graders and 36.1% of high schoolers said they had used alcohol in the past month. Of White males, 38.8% had used it in the past month, compared with 31.3% of African-American males; likewise, 34.2% of White females said they had used alcohol, compared with 25.1% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 14.4% had used alcohol by age 11 or younger, 34.0% by age 13, and 55.2% by age 15.

During the previous year, 41.8% of 7th and 8th graders and 48.2% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 30.4% said they had driven after drinking, and 10.7% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 57.9% of eighth graders and 82.1% of seniors felt that beer was easy to get; 54.0% of eighth graders and 49.3% of seniors felt there was not a great risk in using it regularly.

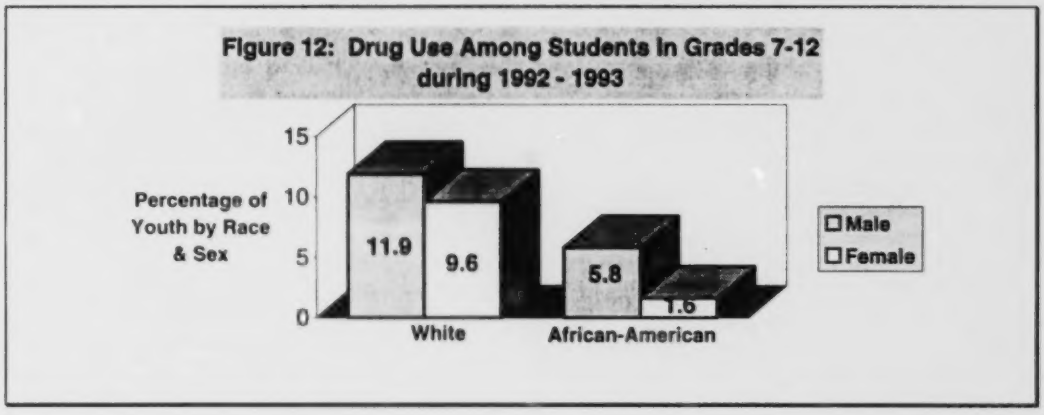
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 26.3% of all high school students in 1992-93 responded 3 or more drinks at a time; 16.4% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 5.7% of 7th and 8th graders and 8.2% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (11.9%) and White females (9.6%); use among African-American males was 5.8%; African-American females, 1.6%. Some young people first used drugs at an early age: among students 15 and older, 2.3% experienced their first use by age 11 or sooner; 6.5% had used a drug by age 13, and 13.3% by age 15.

Of seniors who had initiated use of marijuana, 6.1% had started use at home, 37.4% at a friend's home, and 56.4% elsewhere. During the past year, 1.8% of all high school students said that they used marijuana at home, 4.7% at a friend's house, and 3.4% in a car. In the past year, 5.4% of all high school students who drive and 8.3% of seniors who drive said that they had driven after using drugs . Furthermore, 5.7% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 24.3% of 8th graders who had an opinion said it is easy to get marijuana and 21.8% said it is easy to get cocaine or crack; 56.0% of seniors who had an opinion said it is easy to get marijuana and 49.3% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 13.3% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 313 individual juvenile offenders in the county were referred to the Solicitor; of these, 15.3% were age 12 or younger, 39.3% were 13 or 14, and 45.4% were 15 or older.

Of the referrals to the family court, 17.4% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 13 juvenile cases constituting 3.6% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

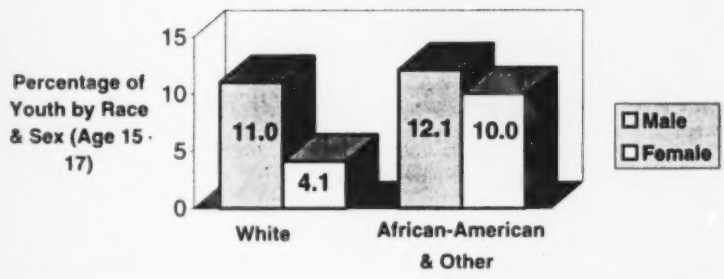
Delinquents are likely to live in families with low income: 27.2% lived in families with income under $10,000, 38.0% with $10,000-$19,999 and 34.7% with $20,000 or more. Furthermore, only 30.2% of delinquents lived with both natural parents, while 48.8% lived in a single parent household and 20.9% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 26.5% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 20.4% had at least one prior referral and 7.7% had been referred to court 3 times or more.

In 1994-95, there were 16 juvenile commitments from the county to State institutions.

During 1994-95, 149 youth ages 15 to 17 were referred to the family courts. In the county, 9.5% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.

Figure 13: Court Referrals



Deaths: During 1990-94, 12 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 6 deaths between 1990 and 1994; homicides killed 1 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 30.9% of children in single-parent families, 22.8% in poverty, 29.6% dropping out of school, 36.1% of high school students using alcohol and 13.3% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
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Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

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SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

CHESTER

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	62	13.5	7.3	1.85	45	1994
Births to Mothers Not Completing High School	133	29.0	21.8	1.33	38	1994
Births to Single Mothers	200	43.6	30.4	1.43	34	1994
Children in Single-Parent Families	2,325	30.9	25.1	1.23	35	1990
Parents Working	2,916	78.8	74.3	1.06	42	1990
Abuse & Neglect Victims	104	1.1	1.0	1.10	28	1995-96
Separation from Parents	306	3.3	5.1	0.65	1	1990
Economic Status						
Poor Children	2,078	22.8	21.0	1.09	22	1989
Mean Income of Families with Children	$30,656	NA	NA	0.86	28	1989
Health						
Less than Adequate Prenatal Care	194	42.3	32.0	1.32	39	1994
Low Birth Weight	47	10.2	9.2	1.11	28	1994
Not Adequately Immunized	89	13.0	18.0	0.72	22	1995
Cigarette Smokers (High School)	282	20.2	23.1	0.87	21	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	204	32.6	28.1	1.16	35	1994-95
1st Grade Failures	69	10.9	6.8	1.60	33	1994-95
Failures grades 1-3 (approx. %)	105	17.9	11.3	1.58	33	1994-95
Overage for Grade 3	115	24.6	16.2	1.52	42	1995-96
Special Education (ages 8 and 9)	194	18.9	15.3	1.24	38	1995-96
School Achievement						
Special Education Grades 1 - 12	830	14.3	13.0	1.10	31	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	217	48.2	27.9	1.73	43	1995-96
Grade 8 BSAP - Math (Below standards)	190	42.6	34.8	1.22	30	1995-96
Grade 8 BSAP - Reading (Below standards)	188	42.2	28.8	1.47	39	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	207	39.0	29.5	1.32	34	1995-96
Exit Exam (Not passing all parts on 1st attempt)	122	34.4	35.3	0.97	17	1995-96
Dropout Rate	615	29.6	27.3	1.08	29	1992-95
25-34 Year olds with no HS Degree or GED	1,280	26.0	19.1	1.36	32	1990
Adolescent Risk Behavior						
Not in School or Employed	230	10.9	9.6	1.14	25	1990
Pregnancy (Ages 14 - 17)	72	7.5	4.8	1.56	43	1994
Alcohol Use (High School)	504	36.1	37.4	0.97	24	1992-93
Drug Use (High School)	114	8.2	12.8	0.64	20	1992-93
Binge Drinking (5 or more drinks)	229	16.4	16.3	1.01	26	1992-93
Delinquency (ages 15 - 17)	140	9.5	6.4	1.48	42	1994-95

* 1 = "best" 46 = "worst"

CHESTER TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	46	9.1	1.38	1992	39	7.9	1.20	1993	62	13.5	1.85	1994
Births to Mothers Not Completing High School	137	27.0	1.14	1992	135	27.2	1.21	1993	133	29.0	1.33	1994
Births to Single Mothers	211	41.5	1.37	1992	206	41.5	1.37	1993	200	43.6	1.43	1994
Children in Single-Parent Families		14.3	0.99	1970		20.1	1.06	1980	2,325	30.9	1.23	1990
Economic Status												
Poor Children		32.0	1.11	1969		23.5	1.11	1979	2,078	22.8	1.09	1989
Mean Income of Families with Children					30,358	N/A	1.09	1979	30,656	N/A	1.16	1989
Health												
Less than Adequate Prenatal Care	269	53.0	1.34	1992	232	46.8	1.33	1993	194	42.3	1.32	1994
Low Birth Weight	44	8.7	0.97	1992	48	9.7	1.04	1993	47	10.2	1.11	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	140	26.6	1.00	1990-91	168	29.5	1.06	1992-93	204	32.6	1.16	1994-95
1st Grade Failures	62	12.3	1.37	1991-92	58	12.6	1.30	1992-93	69	10.9	1.60	1994-95
Failures Grades 1-3 (approx. %)	87	17.4	1.23	1991-92	76	16.6	1.16	1992-93	105	17.9	1.58	1994-95
Overage for Grade 3	112	23.0	0.89	1991-92	112	25.1	1.22	1993-94	115	24.6	1.52	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	175	36.8	1.91	1991-92	172	35.9	1.81	1993-94	217	48.2	1.73	1995-96*
Grade 8 BSAP - Math (Below Standards)	155	31.3	1.16	1991-92	182	36.4	1.18	1993-94	190	42.6	1.22	1995-96
Grade 8 BSAP - Reading (Below Standards)	145	29.4	1.20	1991-92	171	34.1	1.18	1993-94	188	42.2	1.47	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	197	37.5	1.71	1991-92	193	35.7	1.47	1993-94	207	39.0	1.32	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	152	43.8	1.41	1991-92	156	39.7	1.21	1993-94	122	34.4	0.97	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	67	7.1	1.51	1992	55	5.8	1.29	1993	72	7.5	1.56	1994
Alcohol Use (High School)	555	40.3	1.00	1989-90					504	36.1	0.97	1992-93
Drug Use (High School)	155	11.2	0.84	1989-90					114	8.2	0.64	1992-93
Binge Drinking (5 or more drinks)		15.8	1.01	1989-90					229	16.4	1.01	1992-93

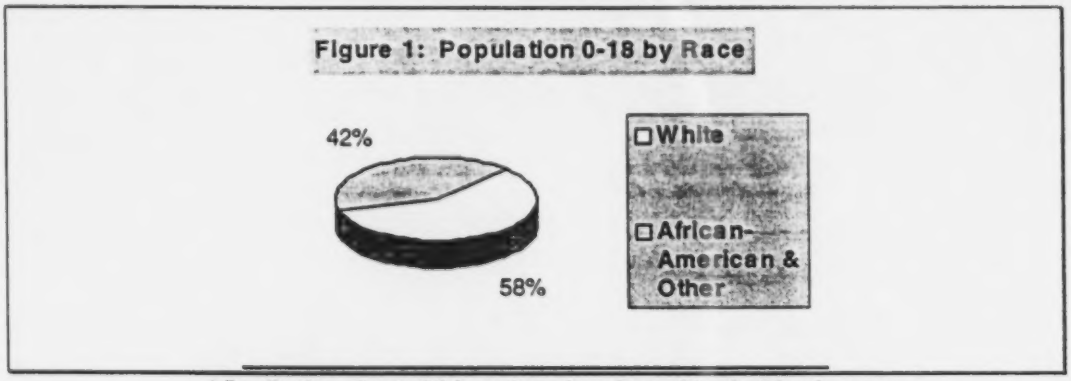
SOUTH CAROLINA kids count

1996 Report CHESTERFIELD

DEMOGRAPHICS

In 1994, there were 10,700 children under age 18 in the county. Of these, 6,180 were White and 4,520 were African-American and Other races. There were 12,271 children under age 18 in 1980, 13,038 in 1970, and 14,893 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 27.2% of the population in 1994, down from 44.2% in 1960, 38.7% in 1970 and 32.2% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 36.9% of all households in 1990, as compared with 48.0% of households in 1960, had children below the age of 18.

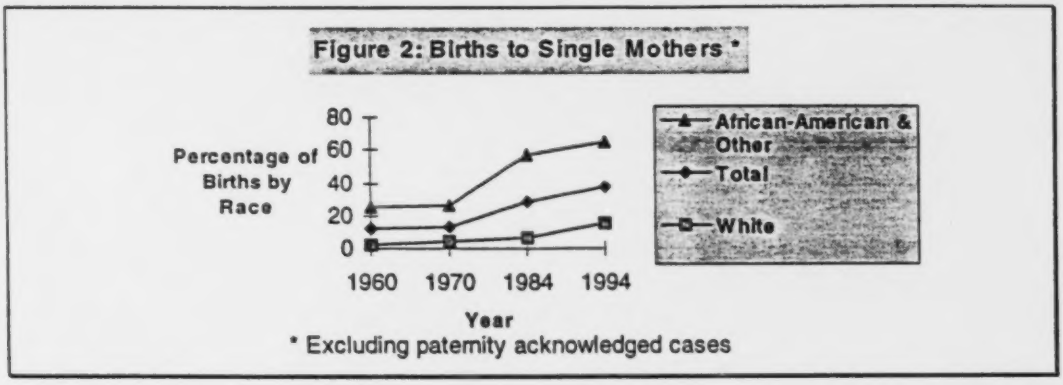
Births to Teen Mothers: In 1994, 60 babies were born to mothers younger than age 18. These babies were 10.4% of all children born in the county; 6.3% of all White babies and 15.3% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 81.7% were born to single mothers.

In 1994, 122 babies were born to mothers younger than age 20. These babies were 21.1% of all children born in the county; 16.4% of all White babies and 26.8% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 70.5% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 172 babies, 29.7% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 53.2% in 1970.

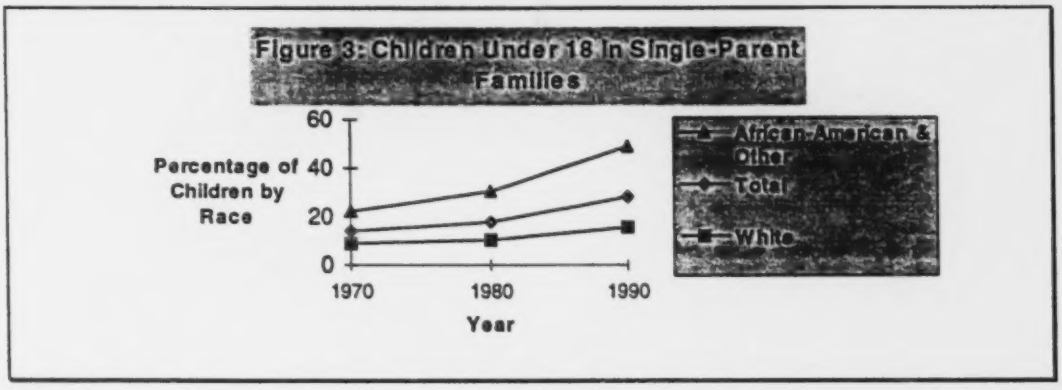
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 215 babies, 37.1% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 28.5% and in 1960 it was 12.5%. In 1994, 14.8% of White children and 64.4% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 26 babies, 4.5% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 241, constituting 41.6% of all babies, 19.8% of White babies, and 68.2% of African-American and Others.



Divorce Rate: In 1994, 962 marriage licenses were issued, while 171 divorce decrees involving 142 children were filed. In 1970 only 26 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 2,578 children lived with only one parent. This was 28.0% of all children, up from 18.1% in 1980 and 13.8% in 1970. In 1990, 15.6% of White children and 48.6% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 66.1% of mothers with children under 6 and 77.7% with children 6 - 17 were in the labor force. This has increased substantially from 35.6% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 666 children investigated as alleged child abuse and neglect victims: 30.0% for physical abuse, 12.0% for sexual abuse, 71.3% for neglect, and 16.1% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 132 children were victims of abuse and neglect: of these 47.0% were male and 53.0% were female; 56.1% were White, and 43.9% were African-American and Other. By age, 38.6% were 0 - 5, 45.5% were 6 - 12, and 15.9% were 13 - 17. They constituted 1.2% of all children age 18 or younger; 1.2% of all Whites and 1.3% of all African-Americans and Others. In the verified cases, 34.1% of abused and neglected children lived in two parent families, 49.2% in single parent families, 1.5% with extended families, and 15.2% in other circumstances.

Family Violence: In 1994, 129 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 20.0% of all assaults, which include both simple and aggravated assaults. Overall, 61.2% of all domestic assaults involve spouse abuse (constituting 12.1% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 5.8% of all children did not live with their natural parents; of these, 538 or 5.0% of children lived with relatives, 82 or 0.8% lived with non-relatives, and 0 were in institutional facilities.

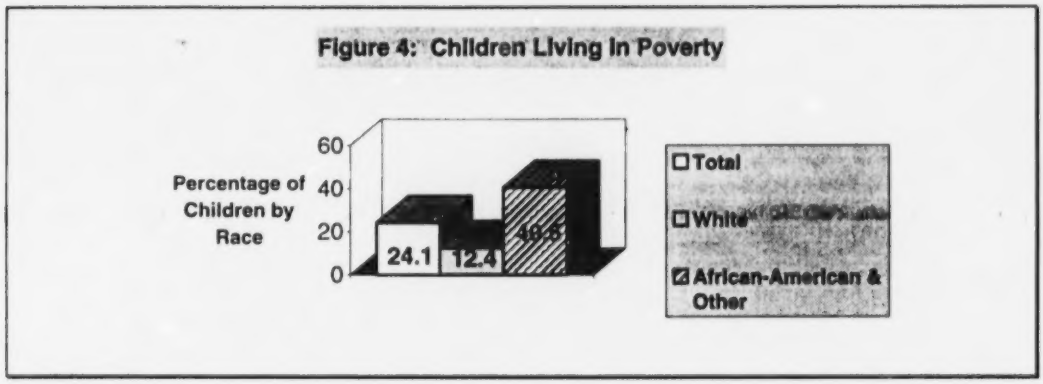
Out of Home Placements: As of September 30, 1996, 50 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 14.0% 0-2, 18.0% 3-5, 28.0% 6-10, 12.0% 11-13, and 28.0% 14 and above. The foster care population is comprised of 56.0% males and 44.0% females. Regarding their future, 18.0% were under a plan for placement in adoptive homes, 60.0% for return to a parent or guardian, 4.0% for placement with a relative, 12.0% for independent living, 6.0% for permanent foster care, and 0.0% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.67 adults for every person below age 18. This was up substantially from 1960, when there were only 1.26 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 2,574 children and youth under the age of 18 lived in families with incomes below poverty. Over 24.1% of all children and youth lived below poverty: 12.4% of Whites and 40.5% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 24.1% in 1989, it was 21.7% in 1979 and 33.0% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 33.0% of children 0 - 5 and 20.2% of children 6 - 17 lived in poverty; 29.0% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 51.4% of children in single-parent families lived in poverty, but only 11.7% of children in married-couple families were poor. Children in single-parent families made up 65.3% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 3,340 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 766 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	10,671	2,574	3,340	3,952	4,977	5,340	5,720
Percent		24.1%	31.3%	37.0%	46.6%	50.0%	53.6%
White	6,229	774	1,117	1,386	1,843	2,070	2,347
Percent		12.4%	17.9%	22.3%	29.6%	33.2%	37.7%
African-American and Other	4,442	1,800	2,223	2,566	3,134	3,270	3,373
Percent		40.5%	50.0%	57.8%	70.6%	73.6%	75.9%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 13.5% of households did not have a car; 8.0% of Whites and 26.5% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 15.7% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 35.7% of households had no phone.

Income: The mean income of families with children in 1989 was $29,146; in 1979, it had been $29,971, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 10.3%.

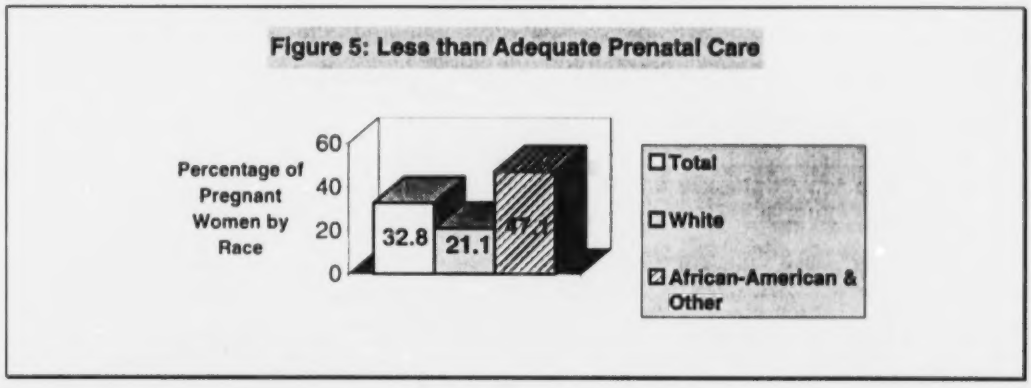
The mean income of single-parent families with children was $12,551 in 1989, as compared with $35,063 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 711 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 48.8% had child support court orders. The average monthly payment of child support was $143.62, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 453 parents in non-AFDC families were obligated to pay a monthly average of $150.87. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 158 or 27.3% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 190 or 32.8% of pregnant women received less than adequate prenatal care: 67 or 21.1% of Whites and 123 or 47.1% of African-Americans and Others. In that same year, 8 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 66 or 11.4% of all babies in the county were born with low birthweight. Over 14.9% of African-American babies and 8.5% of White babies were born with low birthweight. During 1992-94, approximately 46 or 2.6% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 36.2%. For Whites, the rate decreased by 61.8%, while for African-Americans and Others, the rate decreased by 9.4%. Over the three-year period 1992-94, 9 White and 20 African-American and Other infants died before age one. By comparison, 23 White and 18 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 4 White and 8 African-American and Other children ages 1-14 died in the county. During 1982-84, 5 White and 4 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 65.6% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 8.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 421 to 632 youth ages 13-19 in the county were infected with a STD. In the county, there were 3 reported cases of children under age 15 and 63 youth ages 15 - 19 infected with gonorrhea; 2 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 11.7% first smoked by age 11, 27.1% by age 13, and 37.7% by age 15. In a typical month, 13.6% of 7th and 8th graders and 21.1% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 27.0% of White 7th to 12th graders used cigarettes, in comparison with 4.9% African-Americans. A smaller but significant group of high school students (6.8%) used smokeless tobacco monthly; it was used primarily by White males (18.6%) compared with 1.6% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 1,070 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 472 students in grades 1-12 with learning disabilities and 142 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 722 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 1,584 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 10 nurses; 5 are currently available.

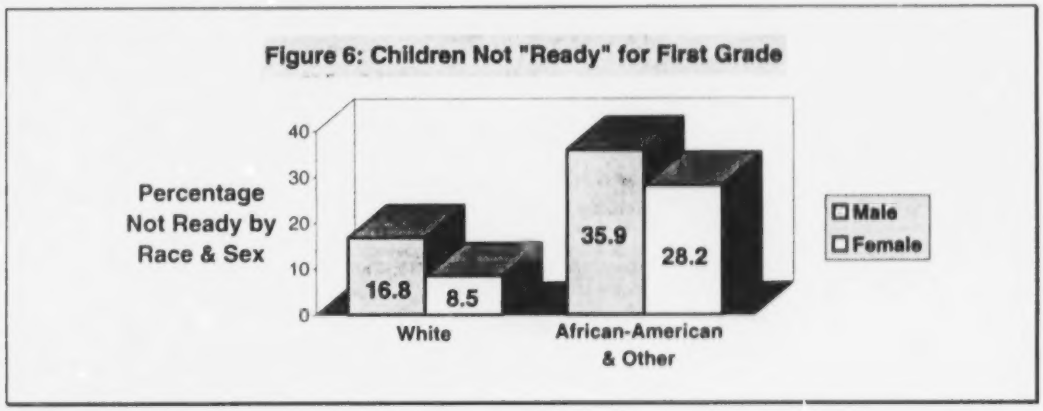
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 39.3% for Whites and 39.2% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

133 children not ready	21.0% children not ready

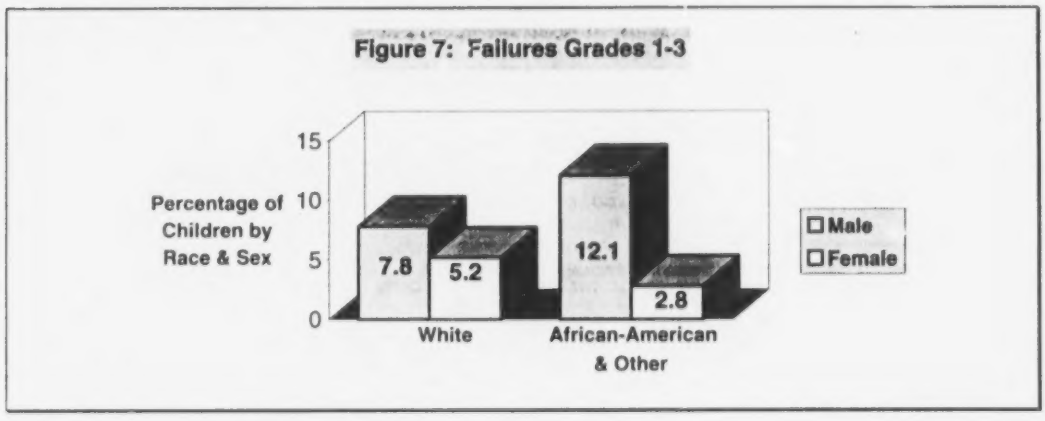


1st Grade Failures in 1995:

22 children failing	3.6% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

44 children failing	7.2% children failing



Overage for Grade 3 in 1996:

39 children overage	7.4% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 196 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 16.8% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 21.0% assessed not ready for the 1st grade, 7.4% overage in grade 3, and 16.8% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

SCHOOL ACHIEVEMENT

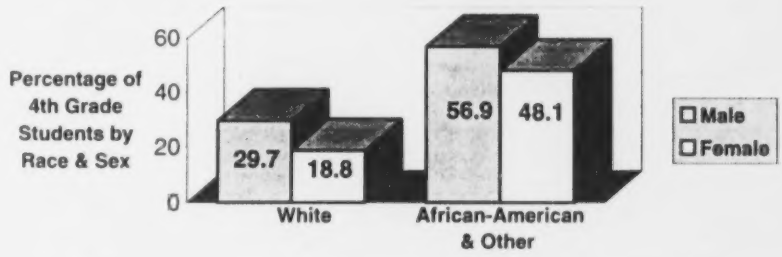
By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 142 speech and language impaired, 472 learning disabled, 29 emotionally disabled, 241 mentally impaired, and 27 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 12.8% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

211 children at or below 25th percentile	37.8% children at or below 25th percentile

Figure 8: Grade 4 Metropolitan at or Below 25th Percentile



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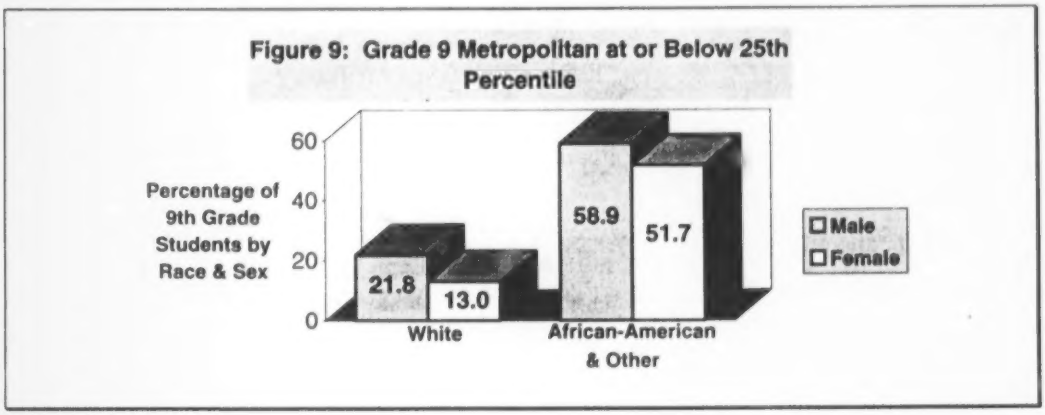
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	239	40.0	179	30.1
White Males	53	27.3	44	22.7
White Females	47	27.6	23	13.5
African-American & Other Males	77	65.8	66	57.4
African-American & Other Females	61	53.0	46	40.0

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

238 students at or below 25th percentile

33.7% students at or below 25th percentile

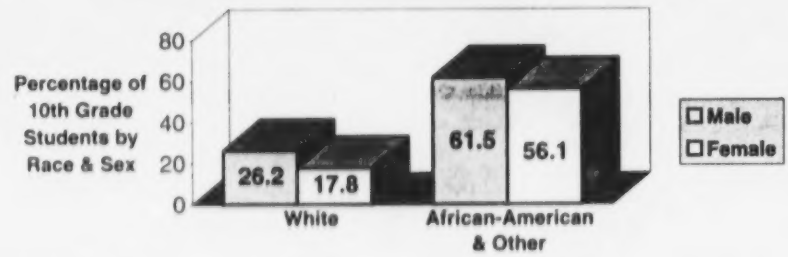


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

203 students not passing all parts

37.4% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



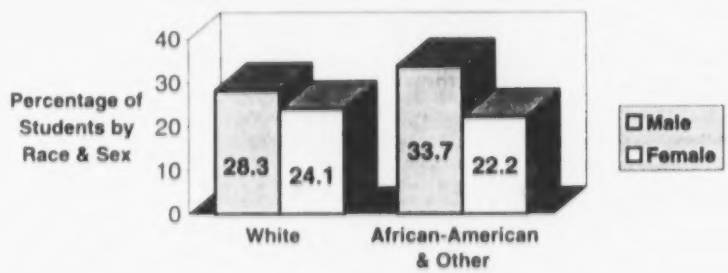
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 67.2% to 33.3% in math and from 57.1% to 32.5% in reading. During the 1990s the trend altered, with 40.0% not meeting 8th grade math standards in 1996 and 30.1% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 31.0% in 1983 on the CTBS, 41.3% in 1990 on the Stanford, and 32.8% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 41.5% in 1990 and 33.4% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

674 students drop out

27.2% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 36.6% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 34.4% during 1985-89, and 29.7% during 1990-94. During the 1995-96 period, 94.5% of all who did graduate received the State High School Diploma, while 3.5% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 2.0% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 14 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 33 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 31.0% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 27.2% to 40.0%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 339 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 13.7% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

8.6%	White Males	15.5%	African-American & Other Males
13.4%	White Females	20.4%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 54 girls between the ages of 14 and 17 became pregnant in 1993 and 76 in 1994. In 1994, this represented 6.6% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 4.4% for Whites and 9.8% for African-Americans and others. Of all pregnancies to 14-17 year olds, 76.3% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it increased by 49.5%.

Alcohol Use: In 1992-93, 16.5% of 7th and 8th graders and 32.2% of high schoolers said they had used alcohol in the past month. Of White males, 36.7% had used it in the past month, compared with 21.9% of African-American males; likewise, 26.0% of White females said they had used alcohol, compared with 12.7% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 12.4% had used alcohol by age 11 or younger, 29.0% by age 13, and 49.6% by age 15.

During the previous year, 36.7% of 7th and 8th graders and 44.5% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 30.6% said they had driven after drinking, and 6.8% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 53.6% of eighth graders and 84.0% of seniors felt that beer was easy to get; 50.8% of eighth graders and 44.8% of seniors felt there was not a great risk in using it regularly.

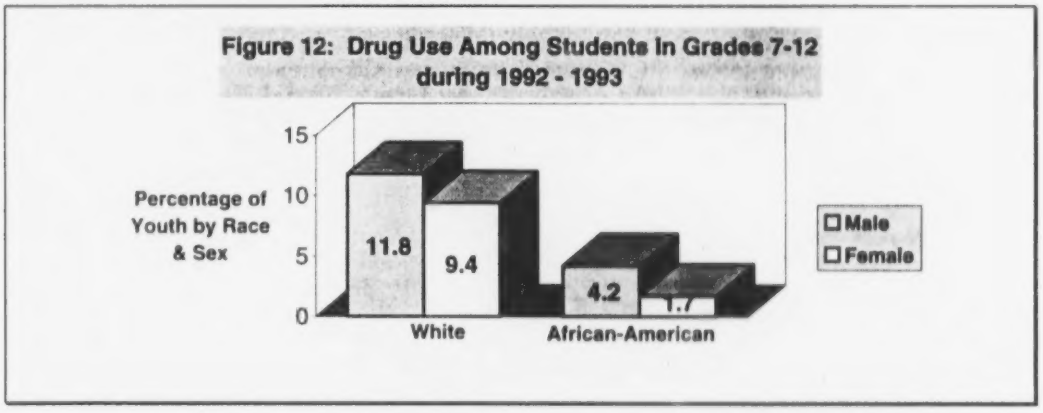
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 24.3% of all high school students in 1992-93 responded 3 or more drinks at a time; 14.5% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 4.9% of 7th and 8th graders and 9.3% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (11.8%) and White females (9.4%); use among African-American males was 4.2%; African-American females, 1.7%. Some young people first used drugs at an early age: among students 15 and older, 2.6% experienced their first use by age 11 or sooner; 6.6% had used a drug by age 13, and 14.3% by age 15.

Of seniors who had initiated use of marijuana, 5.3% had started use at home, 42.5% at a friend's home, and 52.2% elsewhere. During the past year, 2.5% of all high school students said that they used marijuana at home, 5.2% at a friend's house, and 5.2% in a car. In the past year, 5.1% of all high school students who drive and 8.0% of seniors who drive said that they had driven after using drugs . Furthermore, 5.0% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 29.9% of 8th graders who had an opinion said it is easy to get marijuana and 27.2% said it is easy to get cocaine or crack; 71.8% of seniors who had an opinion said it is easy to get marijuana and 66.1% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 15.1% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 125 individual juvenile offenders in the county were referred to the Solicitor; of these, 8.8% were age 12 or younger, 20.0% were 13 or 14, and 71.2% were 15 or older.

Of the referrals to the family court, 8.8% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 26 juvenile cases constituting 16.4% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

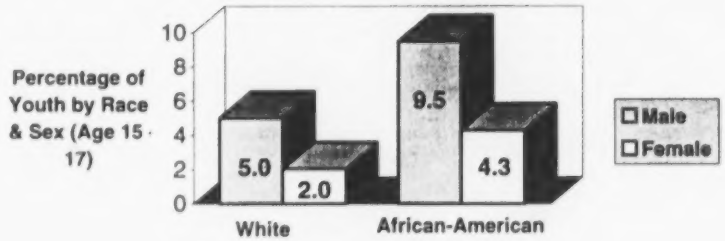
Delinquents are likely to live in families with low income: 38.2% lived in families with income under $10,000, 44.7% with $10,000-$19,999 and 17.1% with $20,000 or more. Furthermore, only 21.8% of delinquents lived with both natural parents, while 50.0% lived in a single parent household and 28.2% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 33.9% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 27.2% had at least one prior referral and 10.4% had been referred to court 3 times or more.

In 1994-95, there were 8 juvenile commitments from the county to State institutions.

During 1994-95, 88 youth ages 15 to 17 were referred to the family courts. In the county, 5.0% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.

Figure 13: Court Referrals



Deaths: During 1990-94, 17 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 6 deaths between 1990 and 1994; homicides killed 5 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 28.0% of children in single-parent families, 24.1% in poverty, 27.2% dropping out of school, 32.2% of high school students using alcohol and 15.1% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

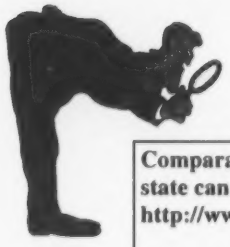
This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

Dr. A. Baron Holmes (803-734-2291) E-mail bholmes@ogc.state.sc.us
-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.



Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

CHESTERFIELD

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	60	10.4	7.3	1.42	35	1994
Births to Mothers Not Completing High School	172	29.7	21.8	1.36	40	1994
Births to Single Mothers	215	37.1	30.4	1.22	24	1994
Children in Single-Parent Families	2,578	28.0	25.1	1.12	26	1990
Parents Working	3,437	74.3	74.3	1.00	20	1990
Abuse & Neglect Victims	132	1.2	1.0	1.20	31	1995-96
Separation from Parents	620	5.8	5.1	1.14	24	1990
Economic Status						
Poor Children	2,574	24.1	21.0	1.15	24	1989
Mean Income of Families with Children	$29,146	NA	NA	0.82	32	1989
Health						
Less than Adequate Prenatal Care	190	32.8	32.0	1.03	24	1994
Low Birth Weight	66	11.4	9.2	1.24	35	1994
Not Adequately Immunized	61	8.0	18.0	0.44	10	1995
Cigarette Smokers (High School)	377	21.1	23.1	0.91	23	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	133	21.0	28.1	0.75	2	1994-95
1st Grade Failures	22	3.6	6.8	0.53	6	1994-95
Failures grades 1-3 (approx. %)	44	7.2	11.3	0.64	6	1994-95
Overage for Grade 3	39	7.4	16.2	0.46	3	1995-96
Special Education (ages 8 and 9)	196	16.8	15.3	1.10	32	1995-96
School Achievement						
Special Education Grades 1 - 12	911	12.8	13.0	0.98	17	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	211	37.8	27.9	1.35	37	1995-96
Grade 8 BSAP - Math (Below standards)	239	40.0	34.8	1.15	26	1995-96
Grade 8 BSAP - Reading (Below standards)	179	30.1	28.8	1.05	21	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	238	33.7	29.5	1.14	25	1995-96
Exit Exam (Not passing all parts on 1st attempt)	203	37.4	35.3	1.06	21	1995-96
Dropout Rate	674	27.2	27.3	1.00	22	1992-95
25-34 Year olds with no HS Degree or GED	1,800	31.0	19.1	1.62	43	1990
Adolescent Risk Behavior						
Not in School or Employed	339	13.7	9.6	1.43	40	1990
Pregnancy (Ages 14 - 17)	76	6.6	4.8	1.38	39	1994
Alcohol Use (High School)	576	32.2	37.4	0.86	8	1992-93
Drug Use (High School)	166	9.3	12.8	0.73	24	1992-93
Binge Drinking (5 or more drinks)	259	14.5	16.3	0.89	20	1992-93
Delinquency (ages 15 - 17)	88	5.0	6.4	0.78	10	1994-95

* 1 = "best" 46 = "worst"

CHESTERFIELD TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	46	7.6	1.15	1992	49	8.1	1.23	1993	60	10.4	1.42	1994
Births to Mothers Not Completing High School	197	32.6	1.38	1992	183	30.3	1.35	1993	172	29.7	1.36	1994
Births to Single Mothers	235	38.8	1.28	1992	234	38.8	1.28	1993	215	37.1	1.22	1994
Children in Single-Parent Families		13.8	0.95	1970		18.1	0.96	1980	2,578	28.0	1.12	1990
Economic Status												
Poor Children		33.0	1.15	1969		21.7	1.02	1979	2,574	24.1	1.15	1989
Mean Income of Families with Children					29,971	N/A	1.10	1979	29,146	N/A	1.22	1989
Health												
Less than Adequate Prenatal Care	304	50.2	1.27	1992	273	45.3	1.28	1993	190	32.8	1.03	1994
Low Birth Weight	67	11.1	1.23	1992	69	11.4	1.23	1993	66	11.4	1.24	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	243	34.2	1.29	1990-91	202	34.0	1.22	1992-93	133	21.0	0.75	1994-95
1st Grade Failures	75	10.9	1.21	1991-92	82	13.0	1.34	1992-93	22	3.6	0.53	1994-95
Failures Grades 1-3 (approx. %)	90	13.6	0.96	1991-92	105	17.4	1.22	1992-93	44	7.2	0.64	1994-95
Overage for Grade 3	178	31.6	1.22	1991-92	125	20.7	1.01	1993-94	39	7.4	0.46	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	122	20.5	1.06	1991-92	90	17.6	0.89	1993-94	211	37.8	1.35	1995-96*
Grade 8 BSAP - Math (Below Standards)	171	28.6	1.06	1991-92	262	39.2	1.27	1993-94	239	40.0	1.15	1995-96
Grade 8 BSAP - Reading (Below Standards)	166	27.8	1.14	1991-92	222	33.1	1.15	1993-94	179	30.1	1.05	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	162	26.1	1.19	1991-92	184	29.9	1.23	1993-94	238	33.7	1.14	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	179	36.7	1.18	1991-92	184	37.6	1.15	1993-94	203	37.4	1.06	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	56	4.9	1.04	1992	54	4.7	1.04	1993	76	6.6	1.38	1994
Alcohol Use (High School)	747	39.4	0.98	1989-90					576	32.2	0.86	1992-93
Drug Use (High School)	288	15.2	1.13	1989-90					166	9.3	0.73	1992-93
Binge Drinking (5 or more drinks)		16.3	1.04	1989-90					259	14.5	0.89	1992-93

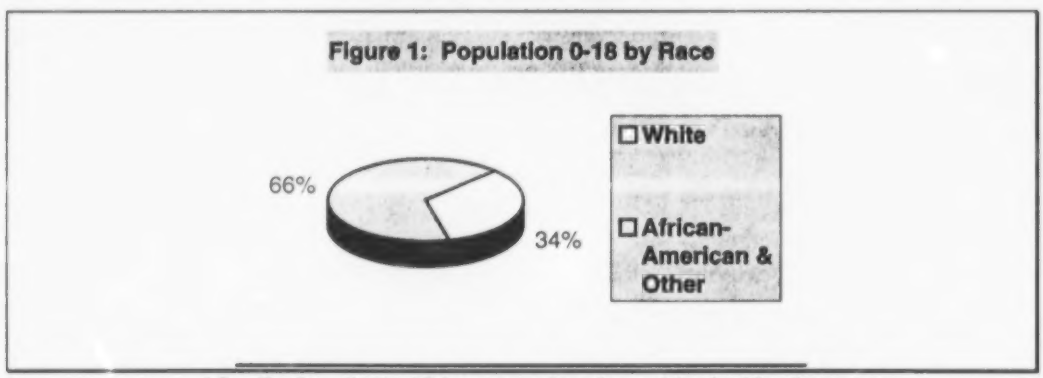
kids count SOUTH CAROLINA

1996 Report CLARENDON

DEMOGRAPHICS

In 1994, there were 8,630 children under age 18 in the county. Of these, 2,910 were White and 5,720 were African-American and Other races. There were 9,170 children under age 18 in 1980, 11,365 in 1970, and 15,172 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 29.4% of the population in 1994, down from 51.4% in 1960, 44.4% in 1970 and 33.4% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 35.8% of all households in 1990, as compared with 50.0% of households in 1960, had children below the age of 18.

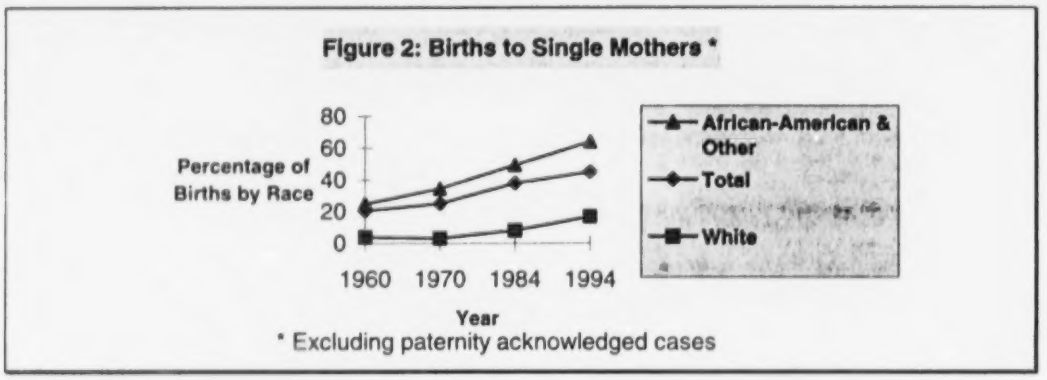
Births to Teen Mothers: In 1994, 36 babies were born to mothers younger than age 18. These babies were 9.4% of all children born in the county; 9.0% of all White babies and 9.6% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 94.4% were born to single mothers.

In 1994, 72 babies were born to mothers younger than age 20. These babies were 18.7% of all children born in the county; 14.2% of all White babies and 21.7% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 84.7% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 105 babies, 27.3% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 59.4% in 1970.

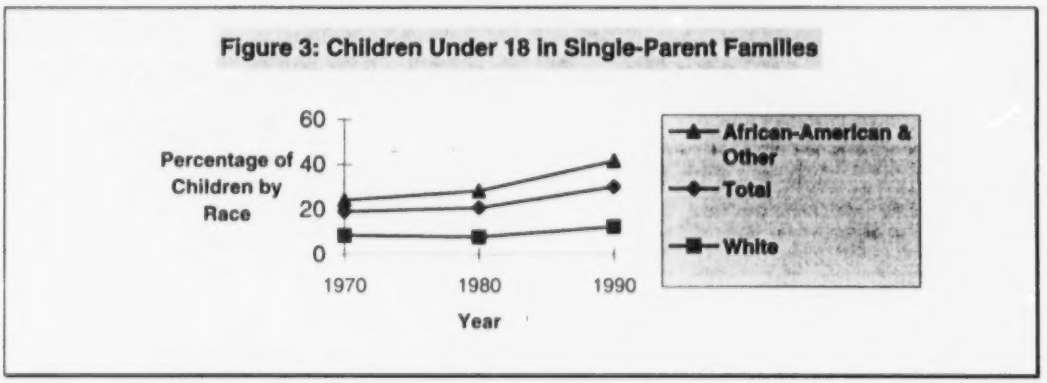
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 173 babies, 44.9% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 37.7% and in 1960 it was 20.4%. In 1994, 16.8% of White children and 63.9% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 14 babies, 3.6% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 187, constituting 48.6% of all babies, 21.9% of White babies, and 66.5% of African-American and Others.



Divorce Rate: In 1994, 211 marriage licenses were issued, while 95 divorce decrees involving 86 children were filed. In 1970 only 22 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 1,988 children lived with only one parent. This was 30.0% of all children, up from 20.6% in 1980 and 18.8% in 1970. In 1990, 12.3% of White children and 41.5% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 66.9% of mothers with children under 6 and 69.2% with children 6 - 17 were in the labor force. This has increased substantially from 43.6% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 200 children investigated as alleged child abuse and neglect victims: 39.0% for physical abuse, 18.0% for sexual abuse, 61.5% for neglect, and 48.0% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 82 children were victims of abuse and neglect: of these 52.4% were male and 47.6% were female; 30.5% were White, and 69.5% were African-American and Other. By age, 37.8% were 0 - 5, 41.5% were 6 - 12, and 20.7% were 13 - 17. They constituted 1.0% of all children age 18 or younger; 0.9% of all Whites and 1.0% of all African-Americans and Others. In the verified cases, 42.7% of abused and neglected children lived in two parent families, 48.8% in single parent families, 0.0% with extended families, and 8.5% in other circumstances.

Family Violence: In 1994, 137 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 35.0% of all assaults, which include both simple and aggravated assaults. Overall, 58.4% of all domestic assaults involve spouse abuse (constituting 20.5% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 6.1% of all children did not live with their natural parents; of these, 393 or 4.7% of children lived with relatives, 96 or 1.1% lived with non-relatives, and 18 were in institutional facilities.

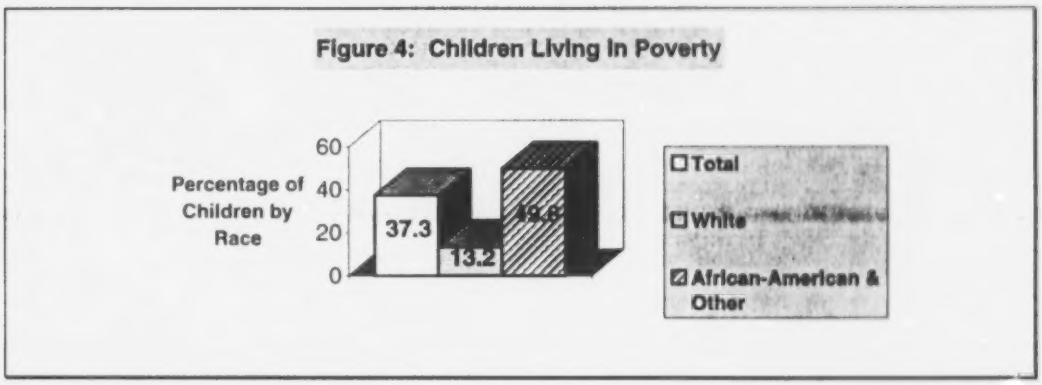
Out of Home Placements: As of September 30, 1996, 67 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 14.9% 0-2, 13.4% 3-5, 23.9% 6-10, 14.9% 11-13, and 32.8% 14 and above. The foster care population is comprised of 52.2% males and 47.8% females. Regarding their future, 29.9% were under a plan for placement in adoptive homes, 29.9% for return to a parent or guardian, 4.5% for placement with a relative, 11.9% for independent living, 22.4% for permanent foster care, and 1.5% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.41 adults for every person below age 18. This was up substantially from 1960, when there were only 0.94 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 3,084 children and youth under the age of 18 lived in families with incomes below poverty. Over 37.3% of all children and youth lived below poverty: 13.2% of Whites and 49.8% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 37.3 % in 1989, it was 36.3% in 1979 and 58.8% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 38.7% of children 0 - 5 and 36.6% of children 6 - 17 lived in poverty; 31.8% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 67.9% of children in single-parent families lived in poverty, but only 22.0% of children in married-couple families were poor. Children in single-parent families made up 60.3% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 3,788 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 704 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	8,262	3,084	3,788	4,439	5,036	5,213	5,551
Percent		37.3%	45.8%	53.7%	61.0%	63.1%	67.2%
White	2,813	371	431	572	781	867	963
Percent		13.2%	15.3%	20.3%	27.8%	30.8%	34.2%
African-American and Other	5,449	2,713	3,357	3,867	4,255	4,346	4,588
Percent		49.8%	61.6%	71.0%	78.1%	79.8%	84.2%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 16.2% of households did not have a car; 6.2% of Whites and 25.9% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 14.2% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 33.0% of households had no phone.

Income: The mean income of families with children in 1989 was $28,717; in 1979, it had been $25,700, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 16.6%.

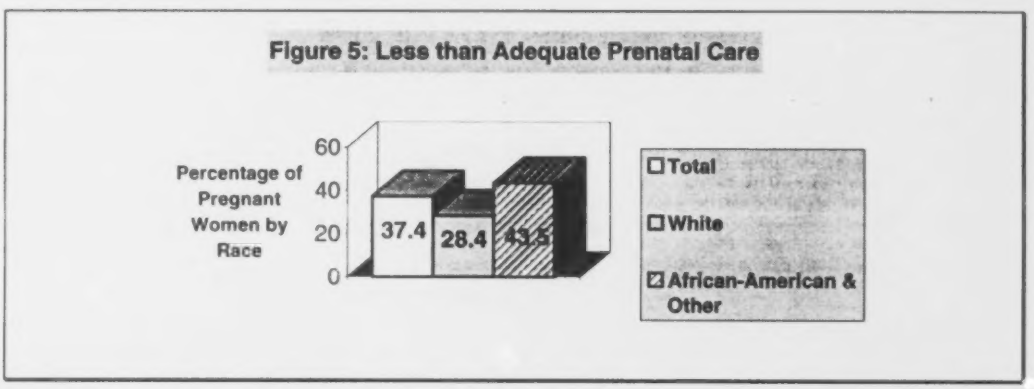
The mean income of single-parent families with children was $12,785 in 1989, as compared with $34,995 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 915 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 39.7% had child support court orders. The average monthly payment of child support was $152.42, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 210 parents in non-AFDC families were obligated to pay a monthly average of $150.50. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 122 or 31.7% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 144 or 37.4% of pregnant women received less than adequate prenatal care: 44 or 28.4% of Whites and 100 or 43.5% of African-Americans and Others. In that same year, 5 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 32 or 8.3% of all babies in the county were born with low birthweight. Over 9.1% of African-American babies and 7.1% of White babies were born with low birthweight. During 1992-94, approximately 32 or 2.6% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 30.8%. For Whites, the rate decreased by 62.8%, while for African-Americans and Others, the rate decreased by 17.3%. Over the three-year period 1992-94, 2 White and 15 African-American and Other infants died before age one. By comparison, 5 White and 23 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 2 White and 7 African-American and Other children ages 1-14 died in the county. During 1982-84, 5 White and 6 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 39.2% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 16.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 319 to 479 youth ages 13-19 in the county were infected with a STD. In the county, there were 2 reported cases of children under age 15 and 26 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 11.2% first smoked by age 11, 23.3% by age 13, and 35.4% by age 15. In a typical month, 9.6% of 7th and 8th graders and 18.3% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 33.0% of White 7th to 12th graders used cigarettes, in comparison with 4.4% African-Americans. A smaller but significant group of high school students (9.7%) used smokeless tobacco monthly; it was used primarily by White males (42.1%) compared with 1.2% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 863 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 220 students in grades 1-12 with learning disabilities and 203 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 578 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 1,277 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 9 nurses; 2 are currently available.

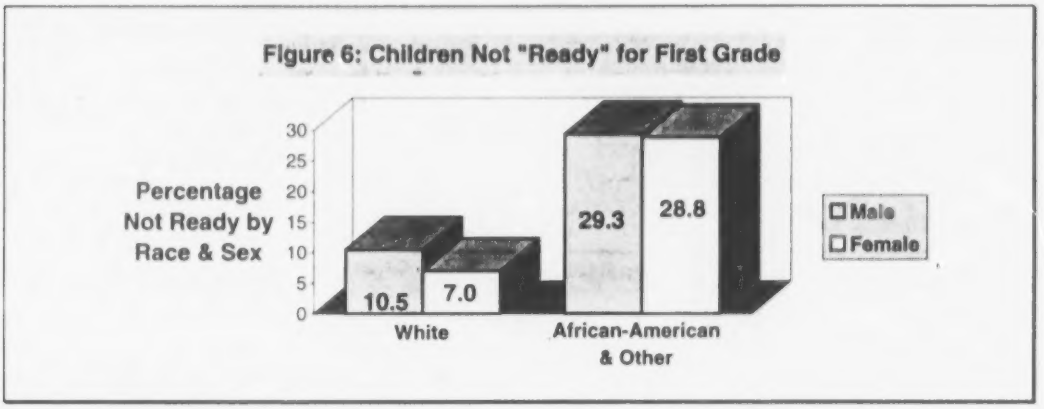
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 33.6% for Whites and 40.5% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

110 children not ready	**24.1% children not ready**

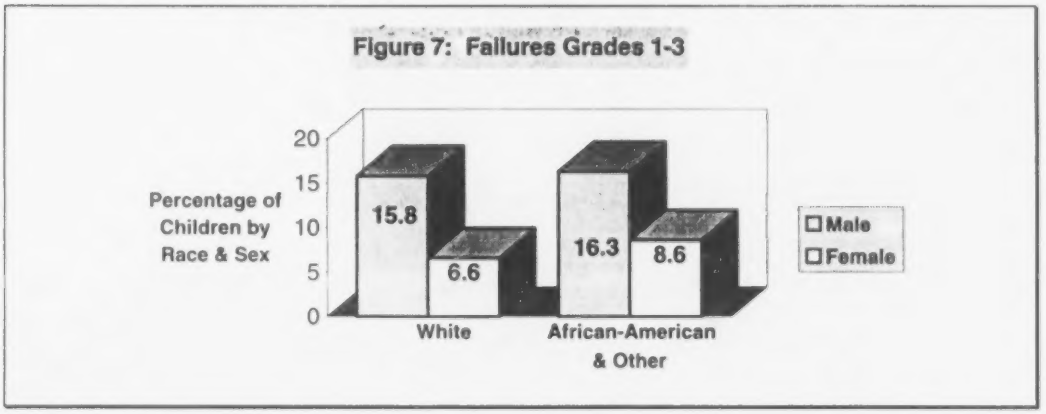


1st Grade Failures in 1995:

30 children failing	**6.1% children failing**

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

59 children failing	**12.3% children failing**



Overage for Grade 3 in 1996:

38 children overage	9.2% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 119 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 13.3% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 24.1% assessed not ready for the 1st grade, 9.2% overage in grade 3, and 13.3% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

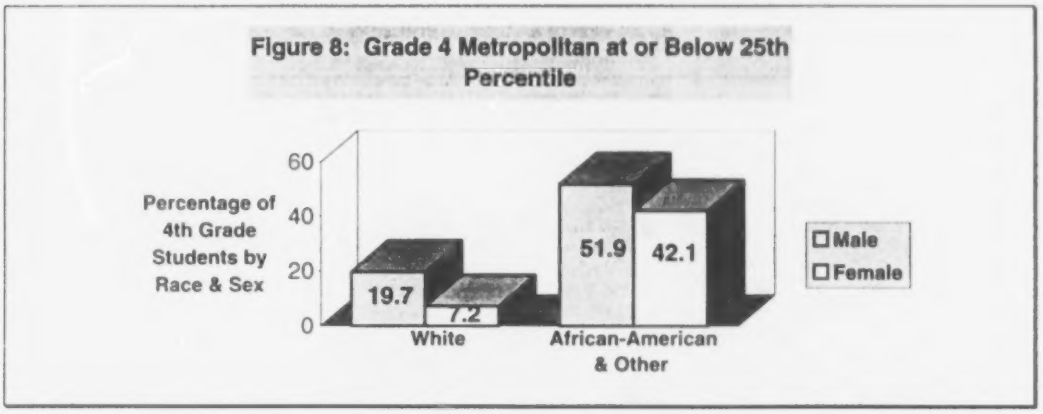
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 203 speech and language impaired, 220 learning disabled, 17 emotionally disabled, 265 mentally impaired, and 23 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 13.1% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996
(i.e. below 75% of students nationwide)

163 children at or below 25th percentile	37.0% children at or below 25th percentile



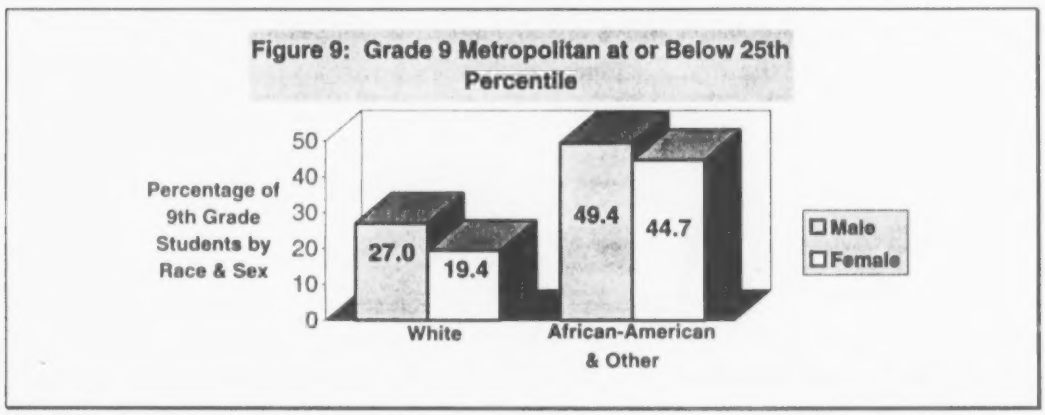
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	202	43.6	149	32.1
White Males	23	29.9	18	23.1
White Females	20	26.3	12	15.8
African-American & Other Males	72	50.3	62	42.8
African-American & Other Females	87	52.1	57	34.5

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

225 students at or below 25th percentile

40.1% students at or below 25th percentile

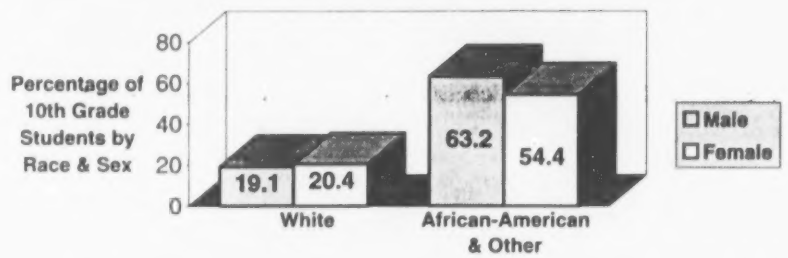


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

177 students not passing all parts

46.7% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



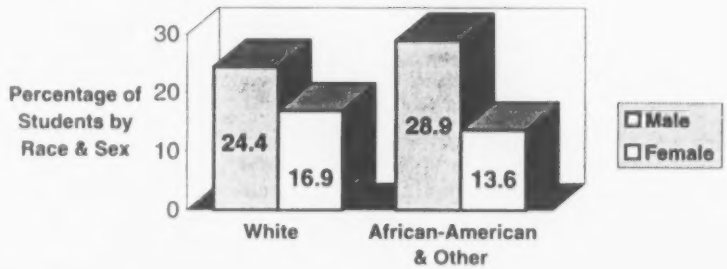
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 71.2% to 26.9% in math and from 70.7% to 26.1% in reading. During the 1990s the trend altered, with 43.6% not meeting 8th grade math standards in 1996 and 32.1% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 44.7% in 1983 on the CTBS, 42.4% in 1990 on the Stanford, and 46.9% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 40.6% in 1990 and 45.0% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

361 students drop out

21.4% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 37.1% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 27.5% during 1985-89, and 27.2% during 1990-94. During the 1995-96 period, 94.6% of all who did graduate received the State High School Diploma, while 2.1% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 3.4% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 28 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 40 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 26.0% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 21.4% to 46.7%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 284 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 15.5% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

11.5%	White Males	14.3%	African-American & Other Males
1.4%	White Females	26.8%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 36 girls between the ages of 14 and 17 became pregnant in 1993 and 50 in 1994. In 1994, this represented 5.9% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 5.5% for Whites and 5.9% for African-Americans and others. Of all pregnancies to 14-17 year olds, 70.0% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 14.8%.

Alcohol Use: In 1992-93, 16.5% of 7th and 8th graders and 31.2% of high schoolers said they had used alcohol in the past month. Of White males, 30.7% had used it in the past month, compared with 29.7% of African-American males; likewise, 29.7% of White females said they had used alcohol, compared with 16.0% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 11.7% had used alcohol by age 11 or younger, 26.9% by age 13, and 51.9% by age 15.

During the previous year, 30.9% of 7th and 8th graders and 46.4% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 26.1% said they had driven after drinking, and 13.3% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 47.0% of eighth graders and 82.7% of seniors felt that beer was easy to get; 52.7% of eighth graders and 44.5% of seniors felt there was not a great risk in using it regularly.

No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

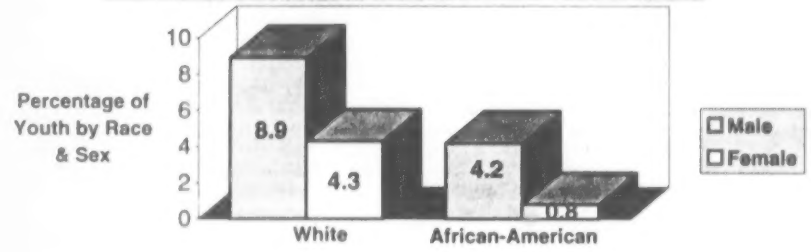
Heavy Drinking: When asked how many drinks, if any, they usually consume, 19.5% of all high school students in 1992-93 responded 3 or more drinks at a time; 11.7% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 2.2% of 7th and 8th graders and 5.2% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (8.9%) and White females (4.3%); use among African-American males was 4.2%; African-American females, 0.8%. Some young people first used drugs at an early age: among students 15 and older, 2.0% experienced their first use by age 11 or sooner; 3.9% had used a drug by age 13, and 6.9% by age 15.

Of seniors who had initiated use of marijuana, 11.2% had started use at home, 34.7% at a friend's home, and 54.1% elsewhere. During the past year, 1.5% of all high school students said that they used marijuana at home, 2.7% at a friend's house, and 2.2% in a car. In the past year, 2.5% of all high school students who drive and 3.0% of seniors who drive said that they had driven after using drugs . Furthermore, 1.8% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 16.5% of 8th graders who had an opinion said it is easy to get marijuana and 12.7% said it is easy to get cocaine or crack; 52.0% of seniors who had an opinion said it is easy to get marijuana and 47.6% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 8.4% rate for county high school students in 1995.

Figure 12: Drug Use Among Students in Grades 7-12 during 1992 - 1993



Juvenile Delinquency: In 1994-95, 131 individual juvenile offenders in the county were referred to the Solicitor; of these, 17.6% were age 12 or younger, 35.1% were 13 or 14, and 47.3% were 15 or older.

Of the referrals to the family court, 6.2% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 29 juvenile cases constituting 15.0% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

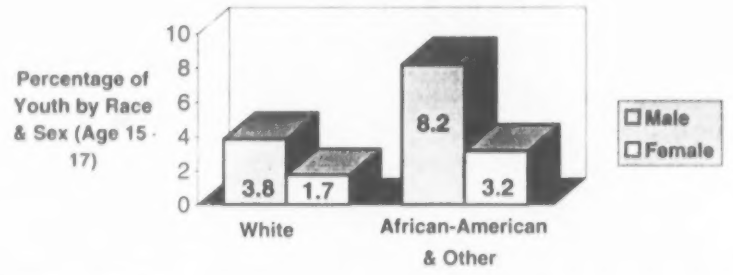
Delinquents are likely to live in families with low income: 61.3% lived in families with income under $10,000, 25.2% with $10,000-$19,999 and 13.5% with $20,000 or more. Furthermore, only 26.3% of delinquents lived with both natural parents, while 57.9% lived in a single parent household and 15.8% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 40.4% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 33.6% had at least one prior referral and 14.5% had been referred to court 3 times or more.

In 1994-95, there were juvenile commitments from the county to State institutions.

During 1994-95, 62 youth ages 15 to 17 were referred to the family courts. In the county, 4.7% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.

Figure 13: Court Referrals



Deaths: During 1990-94, 13 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 7 deaths between 1990 and 1994; homicides killed 3 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 30.0% of children in single-parent families, 37.3% in poverty, 21.4% dropping out of school, 31.2% of high school students using alcohol and 8.4% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

CLARENDON

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	36	9.4	7.3	1.29	27	1994
Births to Mothers Not Completing High School	105	27.3	21.8	1.25	33	1994
Births to Single Mothers	173	44.9	30.4	1.48	35	1994
Children in Single-Parent Families	1,988	30.0	25.1	1.20	31	1990
Parents Working	1,971	68.5	74.3	0.92	5	1990
Abuse & Neglect Victims	82	1.0	1.0	1.00	22	1995-96
Separation from Parents	507	6.1	5.1	1.20	30	1990
Economic Status						
Poor Children	3,084	37.3	21.0	1.78	40	1989
Mean Income of Families with Children	$28,717	NA	NA	0.81	35	1989
Health						
Less than Adequate Prenatal Care	144	37.4	32.0	1.17	32	1994
Low Birth Weight	32	8.3	9.2	0.90	13	1994
Not Adequately Immunized	105	16.0	18.0	0.89	28	1995
Cigarette Smokers (High School)	267	18.3	23.1	0.79	16	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	110	24.1	28.1	0.86	9	1994-95
1st Grade Failures	30	6.1	6.8	0.90	18	1994-95
Failures grades 1-3 (approx. %)	59	12.3	11.3	1.09	21	1994-95
Overage for Grade 3	38	9.2	16.2	0.57	4	1995-96
Special Education (ages 8 and 9)	119	13.3	15.3	0.87	14	1995-96
School Achievement						
Special Education Grades 1 - 12	728	13.1	13.0	1.01	23	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	163	37.0	27.9	1.33	35	1995-96
Grade 8 BSAP - Math (Below standards)	202	43.6	34.8	1.25	32	1995-96
Grade 8 BSAP - Reading (Below standards)	149	32.1	28.8	1.11	24	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	225	40.1	29.5	1.36	36	1995-96
Exit Exam (Not passing all parts on 1st attempt)	177	46.7	35.3	1.32	33	1995-96
Dropout Rate	361	21.4	27.3	0.78	5	1992-95
25-34 Year olds with no HS Degree or GED	1,097	26.0	19.1	1.36	32	1990
Adolescent Risk Behavior						
Not in School or Employed	284	15.5	9.6	1.61	43	1990
Pregnancy (Ages 14 - 17)	50	5.9	4.8	1.23	33	1994
Alcohol Use (High School)	455	31.2	37.4	0.83	6	1992-93
Drug Use (High School)	76	5.2	12.8	0.41	4	1992-93
Binge Drinking (5 or more drinks)	171	11.7	16.3	0.72	9	1992-93
Delinquency (ages 15 - 17)	62	4.7	6.4	0.73	7	1994-95

* 1 = "best" 46 = "worst"

CLARENDON TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	38	8.6	1.30	1992	27	6.9	1.05	1993	36	9.4	1.29	1994
Births to Mothers Not Completing High School	120	27.1	1.15	1992	107	27.2	1.21	1993	105	27.3	1.25	1994
Births to Single Mothers	193	43.7	1.44	1992	178	45.2	1.49	1993	173	44.9	1.48	1994
Children in Single-Parent Families		18.8	1.30	1970		20.6	1.09	1980	1,988	30.0	1.20	1990
Economic Status												
Poor Children		58.8	2.05	1969		36.3	1.71	1979	3,084	37.3	1.78	1989
Mean Income of Families with Children					25,700	N/A	1.29	1979	28,717	N/A	1.24	1989
Health												
Less than Adequate Prenatal Care	210	47.5	1.20	1992	160	40.6	1.15	1993	144	37.4	1.17	1994
Low Birth Weight	39	8.8	0.98	1992	45	11.4	1.23	1993	32	8.3	0.90	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	147	27.8	1.05	1990-91	128	29.3	1.05	1992-93	110	24.1	0.86	1994-95
1st Grade Failures	28	5.8	0.64	1991-92	48	10.6	1.09	1992-93	30	6.1	0.90	1994-95
Failures Grades 1-3 (approx. %)	66	13.6	0.96	1991-92	68	15.3	1.07	1992-93	59	12.3	1.09	1994-95
Overage for Grade 3	146	29.1	1.12	1991-92	101	20.9	1.02	1993-94	38	9.2	0.57	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	131	27.2	1.41	1991-92	131	29.8	1.51	1993-94	163	37.0	1.33	1995-96*
Grade 8 BSAP - Math (Below Standards)	143	31.9	1.18	1991-92	220	44.1	1.43	1993-94	202	43.6	1.25	1995-96
Grade 8 BSAP - Reading (Below Standards)	140	31.1	1.27	1991-92	195	39.4	1.37	1993-94	149	32.1	1.11	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	144	28.5	1.30	1991-92	165	32.5	1.34	1993-94	225	40.1	1.36	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	108	33.8	1.09	1991-92	144	39.8	1.22	1993-94	177	46.7	1.32	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	43	5.1	1.09	1992	36	4.3	0.96	1993	50	5.9	1.23	1994
Alcohol Use (High School)	321	28.9	0.72	1989-90					455	31.2	0.83	1992-93
Drug Use (High School)	83	7.5	0.56	1989-90					76	5.2	0.41	1992-93
Binge Drinking (5 or more drinks)		7.0	0.45	1989-90					171	11.7	0.72	1992-93

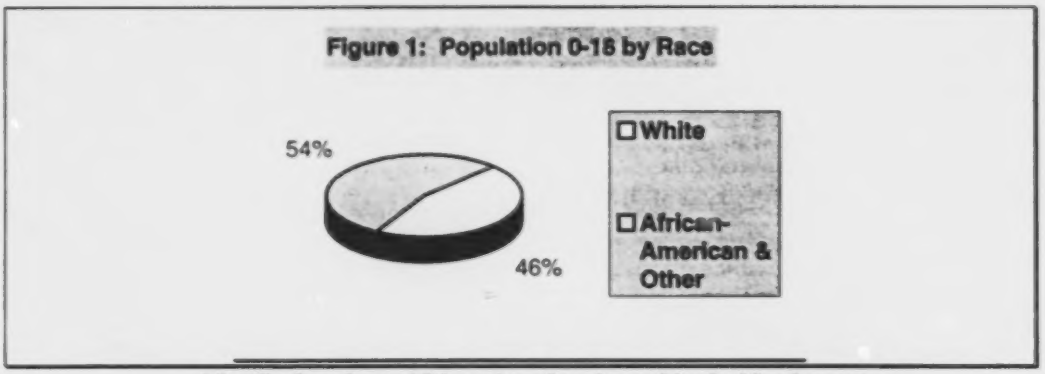
SOUTH CAROLINA kids count

1996 Report COLLETON

DEMOGRAPHICS

In 1994, there were 10,480 children under age 18 in the county. Of these, 4,790 were White and 5,700 were African-American and Other races. There were 10,338 children under age 18 in 1980, 10,919 in 1970, and 12,329 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 28.9% of the population in 1994, down from 44.3% in 1960, 39.5% in 1970 and 32.5% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 36.9% of all households in 1990, as compared with 46.0% of households in 1960, had children below the age of 18.

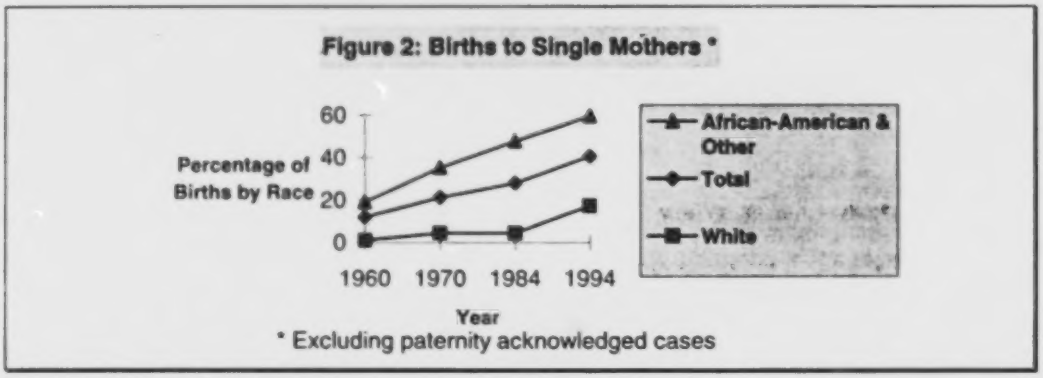
Births to Teen Mothers: In 1994, 50 babies were born to mothers younger than age 18. These babies were 8.8% of all children born in the county; 6.7% of all White babies and 10.6% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 72.0% were born to single mothers.

In 1994, 113 babies were born to mothers younger than age 20. These babies were 20.0% of all children born in the county; 15.0% of all White babies and 24.1% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 72.6% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 146 babies, 25.8% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 52.9% in 1970.

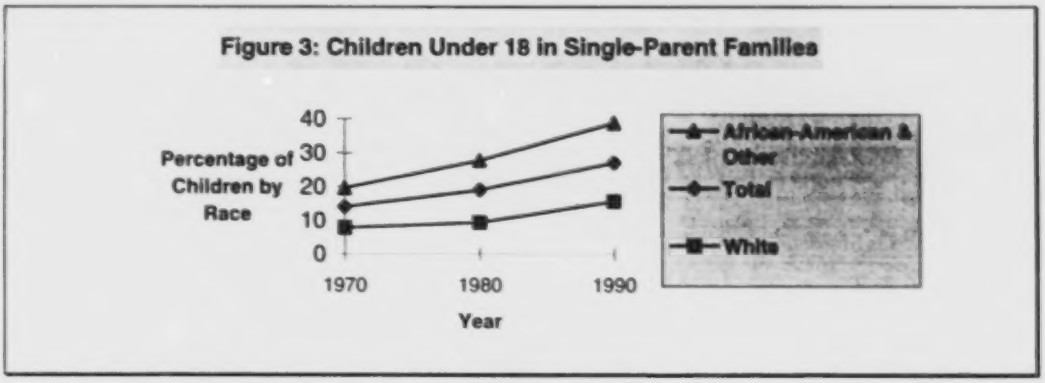
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 229 babies, 40.5% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 27.9% and in 1960 it was 12.0%. In 1994, 17.3% of White children and 59.5% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 32 babies, 5.7% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 261, constituting 46.2% of all babies, 22.4% of White babies, and 65.6% of African-American and Others.



Divorce Rate: In 1994, 326 marriage licenses were issued, while 145 divorce decrees involving 132 children were filed. In 1970 only 35 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 2,255 children lived with only one parent. This was 27.0% of all children, up from 19.0% in 1980 and 14.0% in 1970. In 1990, 15.6% of White children and 38.7% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 62.1% of mothers with children under 6 and 77.7% with children 6 - 17 were in the labor force. This has increased substantially from 30.1% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 769 children investigated as alleged child abuse and neglect victims: 27.4% for physical abuse, 9.5% for sexual abuse, 77.8% for neglect, and 20.7% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 184 children were victims of abuse and neglect: of these 48.4% were male and 51.6% were female; 44.6% were White, and 55.4% were African-American and Other. By age, 40.8% were 0 - 5, 37.5% were 6 - 12, and 21.7% were 13 - 17. They constituted 1.7% of all children age 18 or younger; 1.7% of all Whites and 1.8% of all African-Americans and Others. In the verified cases, 23.4% of abused and neglected children lived in two parent families, 52.7% in single parent families, 1.1% with extended families, and 22.8% in other circumstances.

Family Violence: In 1994, 138 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 21.0% of all assaults, which include both simple and aggravated assaults. Overall, 43.5% of all domestic assaults involve spouse abuse (constituting 9.0% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 7.4% of all children did not live with their natural parents; of these, 547 or 5.4% of children lived with relatives, 191 or 1.9% lived with non-relatives, and 8 were in institutional facilities.

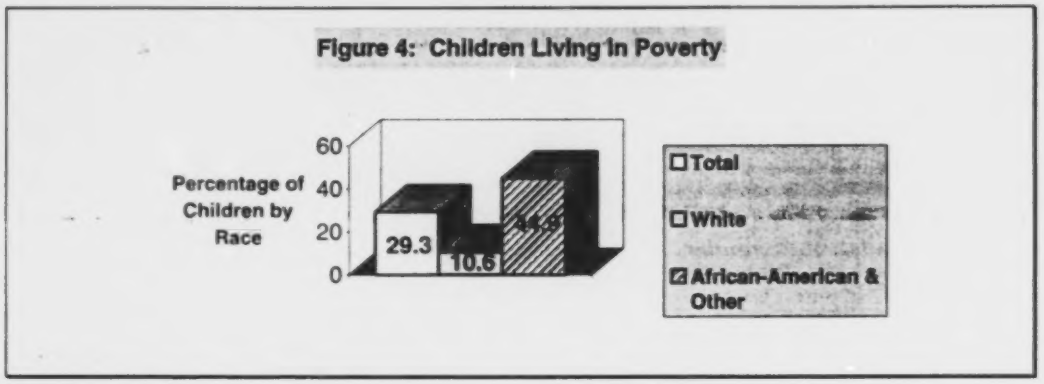
Out of Home Placements: As of September 30, 1996, 63 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 19.0% 0-2, 12.7% 3-5, 23.8% 6-10, 22.2% 11-13, and 22.2% 14 and above. The foster care population is comprised of 49.2% males and 50.8% females. Regarding their future, 15.9% were under a plan for placement in adoptive homes, 41.3% for return to a parent or guardian, 9.5% for placement with a relative, 0.0% for independent living, 33.3% for permanent foster care, and 0.0% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.46 adults for every person below age 18. This was up substantially from 1960, when there were only 1.26 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 2,925 children and youth under the age of 18 lived in families with incomes below poverty. Over 29.3% of all children and youth lived below poverty: 10.6% of Whites and 44.9% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 29.3% in 1989, it was 32.4% in 1979 and 45.5% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 30.8% of children 0 - 5 and 28.7% of children 6 - 17 lived in poverty; 30.5% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 65.3% of children in single-parent families lived in poverty, but only 12.9% of children in married-couple families were poor. Children in single-parent families made up 69.0% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 3,689 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 764 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	9,969	2,925	3,689	4,481	5,118	5,400	5,821
Percent		29.3%	37.0%	44.9%	51.3%	54.2%	58.4%
White	4,526	479	731	989	1,260	1,363	1,536
Percent		10.6%	16.2%	21.9%	27.8%	30.1%	33.9%
African-American and Other	5,443	2,446	2,958	3,492	3,858	4,037	4,285
Percent		44.9%	54.3%	64.2%	70.9%	74.2%	78.7%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 15.7% of households did not have a car; 7.5% of Whites and 27.7% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 13.9% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 34.0% of households had no phone.

Income: The mean income of families with children in 1989 was $29,365; in 1979, it had been $27,528, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 5.1%.

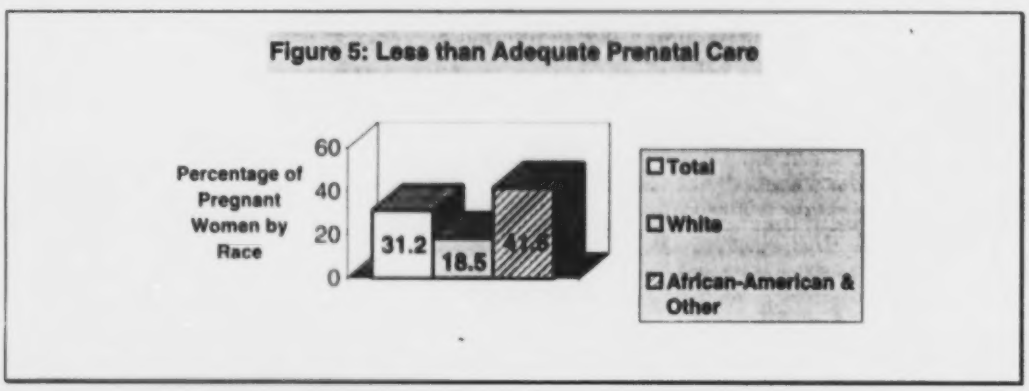
The mean income of single-parent families with children was $12,573 in 1989, as compared with $35,166 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 933 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 34.9% had child support court orders. The average monthly payment of child support was $153.01, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 191 parents in non-AFDC families were obligated to pay a monthly average of $234.78. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 149 or 26.4% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 176 or 31.2% of pregnant women received less than adequate prenatal care: 47 or 18.5% of Whites and 129 or 41.5% of African-Americans and Others. In that same year, 9 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 51 or 9.0% of all babies in the county were born with low birthweight. Over 12.2% of African-American babies and 5.1% of White babies were born with low birthweight. During 1992-94, approximately 38 or 2.2% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 43.2%. For Whites, the rate decreased by 19.1%, while for African-Americans and Others, the rate decreased by 52.7%. Over the three-year period 1992-94, 7 White and 10 African-American and Other infants died before age one. By comparison, 8 White and 20 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 5 White and 10 African-American and Other children ages 1-14 died in the county. During 1982-84, 6 White and 8 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 47.5% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 13.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 398 to 597 youth ages 13-19 in the county were infected with a STD. In the county, there were no reported cases of children under age 15 and 14 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 11.2% first smoked by age 11, 24.9% by age 13, and 32.2% by age 15. In a typical month, 8.1% of 7th and 8th graders and 13.9% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 23.2% of White 7th to 12th graders used cigarettes, in comparison with 3.9% African-Americans. A smaller but significant group of high school students (2.9%) used smokeless tobacco monthly; it was used primarily by White males (12.9%) compared with 0.4% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 1,048 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 480 students in grades 1-12 with learning disabilities and 89 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 703 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 1,551 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 9 nurses; 2 are currently available.

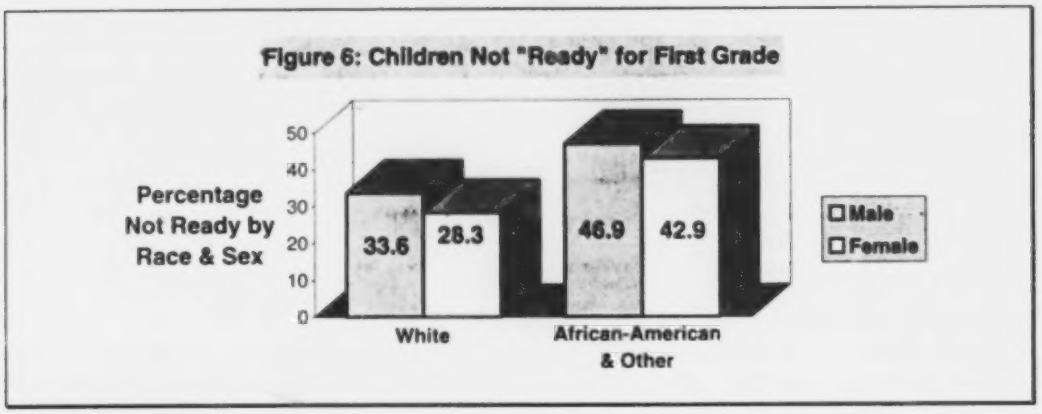
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 19.5% for Whites and 28.5% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

217 children not ready	39.4% children not ready

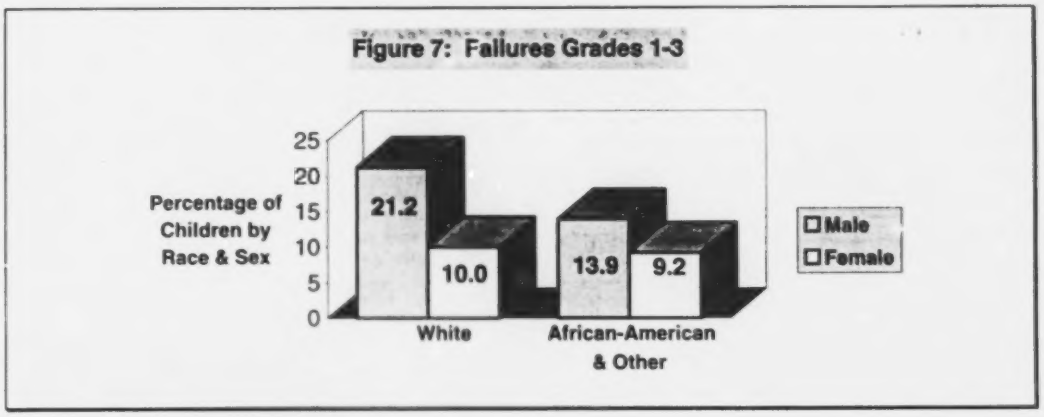


1st Grade Failures in 1995:

31 children failing	5.0% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

79 children failing	13.5% children failing



Overage for Grade 3 in 1996:

114 children overage	22.7% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 155 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 13.8% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 39.4% assessed not ready for the 1st grade, 22.7% overage in grade 3, and 13.8% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

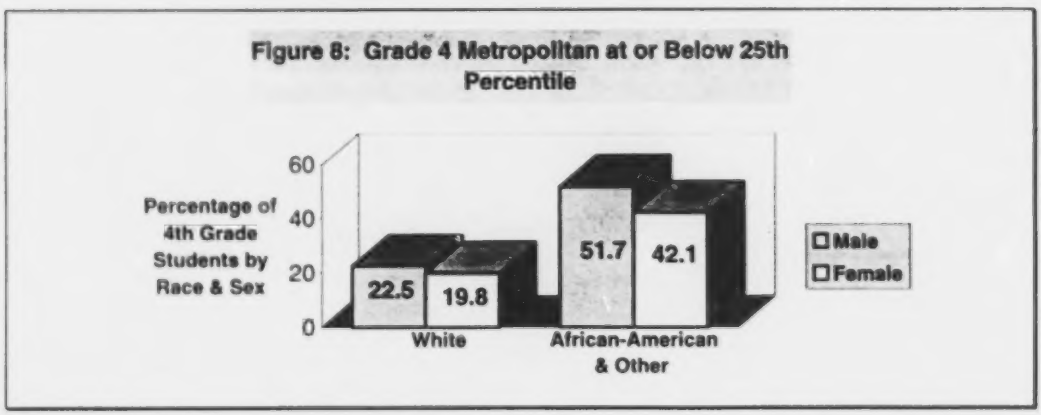
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 89 speech and language impaired, 480 learning disabled, 62 emotionally disabled, 214 mentally impaired, and 30 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 13.9% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

187 children at or below 25th percentile	35.7% children at or below 25th percentile



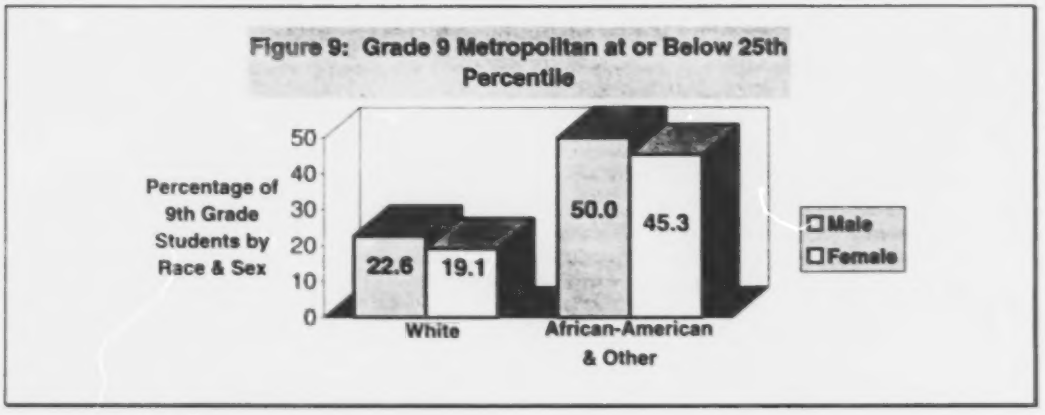
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	205	42.4	143	29.5
White Males	26	28.0	22	24.2
White Females	37	33.0	20	17.9
African-American & Other Males	70	49.6	55	38.5
African-American & Other Females	72	52.2	46	33.3

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

200 students at or below 25th percentile

36.2% students at or below 25th percentile

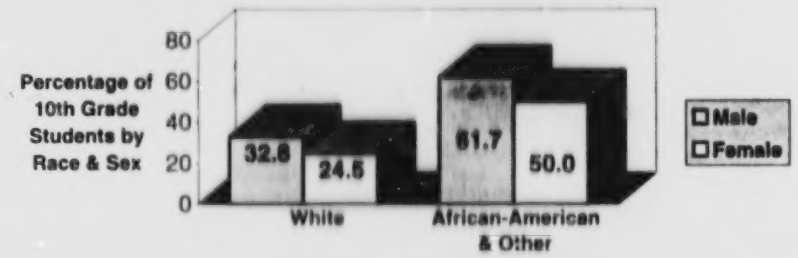


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

177 students not passing all parts

44.4% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



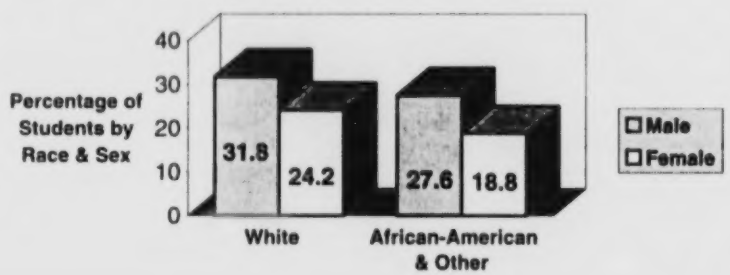
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 62.3% to 41.0% in math and from 61.3% to 26.8% in reading. During the 1990s the trend altered, with 42.4% not meeting 8th grade math standards in 1996 and 29.5% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 32.4% in 1983 on the CTBS, 42.5% in 1990 on the Stanford, and 42.4% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 41.8% in 1990 and 37.3% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

524 students drop out

25.3% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 31.9% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 24.5% during 1985-89, and 31.5% during 1990-94. During the 1995-96 period, 91.1% of all who did graduate received the State High School Diploma, while 8.3% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 0.6% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 18 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 43 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 22.1% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 25.3% to 44.4%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 273 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 11.9% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

3.2%	White Males	16.7%	African-American & Other Males
13.0%	White Females	14.1%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 58 girls between the ages of 14 and 17 became pregnant in 1993 and 65 in 1994. In 1994, this represented 5.8% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 4.8% for Whites and 6.6% for African-Americans and others. Of all pregnancies to 14-17 year olds, 76.9% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 5.1%.

Alcohol Use: In 1992-93, 20.4% of 7th and 8th graders and 31.1% of high schoolers said they had used alcohol in the past month. Of White males, 38.5% had used it in the past month, compared with 26.1% of African-American males; likewise, 34.8% of White females said they had used alcohol, compared with 15.2% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 15.6% had used alcohol by age 11 or younger, 32.5% by age 13, and 50.2% by age 15.

During the previous year, 32.6% of 7th and 8th graders and 40.8% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 20.2% said they had driven after drinking, and 7.8% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 57.4% of eighth graders and 76.1% of seniors felt that beer was easy to get; 57.6% of eighth graders and 44.5% of seniors felt there was not a great risk in using it regularly.

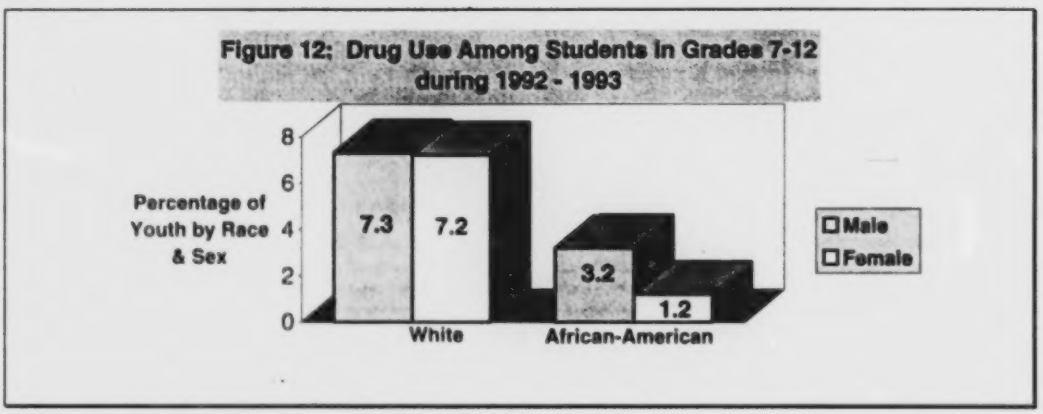
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 21.6% of all high school students in 1992-93 responded 3 or more drinks at a time; 12.6% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 2.2% of 7th and 8th graders and 5.4% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (7.3%) and White females (7.2%); use among African-American males was 3.2%; African-American females, 1.2%. Some young people first used drugs at an early age: among students 15 and older, 2.5% experienced their first use by age 11 or sooner; 4.6% had used a drug by age 13, and 9.4% by age 15.

Of seniors who had initiated use of marijuana, 11.0% had started use at home, 43.0% at a friend's home, and 46.0% elsewhere. During the past year, 1.5% of all high school students said that they used marijuana at home, 4.2% at a friend's house, and 2.8% in a car. In the past year, 3.5% of all high school students who drive and 5.4% of seniors who drive said that they had driven after using drugs . Furthermore, 2.4% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 26.4% of 8th graders who had an opinion said it is easy to get marijuana and 21.2% said it is easy to get cocaine or crack; 60.1% of seniors who had an opinion said it is easy to get marijuana and 53.1% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 8.7% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 235 individual juvenile offenders in the county were referred to the Solicitor; of these, 11.5% were age 12 or younger, 28.9% were 13 or 14, and 59.6% were 15 or older.

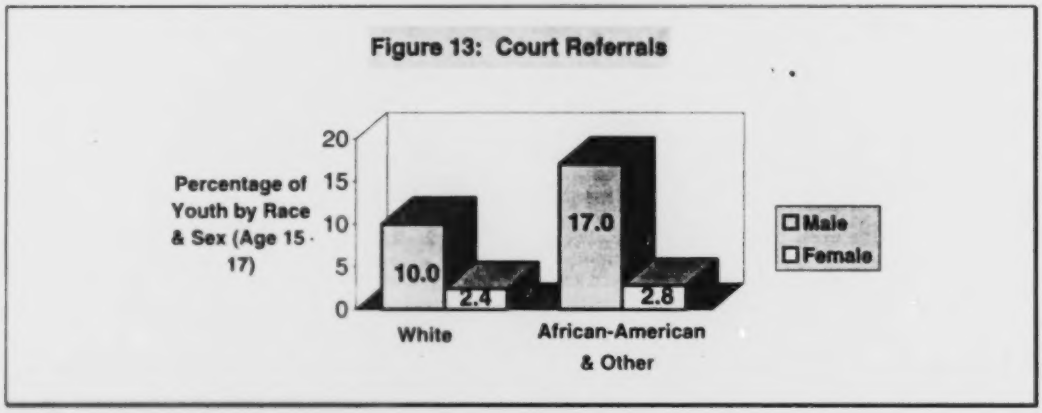
Of the referrals to the family court, 11.6% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 40 juvenile cases constituting 13.7% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 40.4% lived in families with income under $10,000, 37.2% with $10,000-$19,999 and 22.4% with $20,000 or more. Furthermore, only 23.4% of delinquents lived with both natural parents, while 50.5% lived in a single parent household and 26.1% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 37.2% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 28.1% had at least one prior referral and 7.7% had been referred to court 3 times or more.

In 1994-95, there were 12 juvenile commitments from the county to State institutions.

During 1994-95, 137 youth ages 15 to 17 were referred to the family courts. In the county, 8.3% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 20 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 13 deaths between 1990 and 1994; homicides killed 1 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 27.0% of children in single-parent families, 29.3% in poverty, 25.3% dropping out of school, 31.1% of high school students using alcohol and 8.7% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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Office of the Executive Director
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Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

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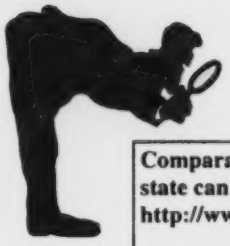
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.



Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

COLLETON

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	50	8.8	7.3	1.21	21	1994
Births to Mothers Not Completing High School	146	25.8	21.8	1.18	26	1994
Births to Single Mothers	229	40.5	30.4	1.33	28	1994
Children in Single-Parent Families	2,255	27.0	25.1	1.08	25	1990
Parents Working	2,814	73.5	74.3	0.99	18	1990
Abuse & Neglect Victims	184	1.7	1.0	1.70	42	1995-96
Separation from Parents	746	7.4	5.1	1.45	39	1990
Economic Status						
Poor Children	2,925	29.3	21.0	1.40	33	1989
Mean Income of Families with Children	$29,365	NA	NA	0.83	31	1989
Health						
Less than Adequate Prenatal Care	176	31.2	32.0	0.98	19	1994
Low Birth Weight	51	9.0	9.2	0.98	19	1994
Not Adequately Immunized	105	13.0	18.0	0.72	22	1995
Cigarette Smokers (High School)	221	13.9	23.1	0.60	8	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	217	39.4	28.1	1.40	44	1994-95
1st Grade Failures	31	5.0	6.8	0.74	12	1994-95
Failures grades 1-3 (approx. %)	79	13.5	11.3	1.19	26	1994-95
Overage for Grade 3	114	22.7	16.2	1.40	40	1995-96
Special Education (ages 8 and 9)	155	13.8	15.3	0.90	18	1995-96
School Achievement						
Special Education Grades 1 - 12	875	13.9	13.0	1.07	27	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	187	35.7	27.9	1.28	30	1995-96
Grade 8 BSAP - Math (Below standards)	205	42.4	34.8	1.22	29	1995-96
Grade 8 BSAP - Reading (Below standards)	143	29.5	28.8	1.02	19	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	200	36.2	29.5	1.23	28	1995-96
Exit Exam (Not passing all parts on 1st attempt)	177	44.4	35.3	1.26	30	1995-96
Dropout Rate	524	25.3	27.3	0.93	17	1992-95
25-34 Year olds with no HS Degree or GED	1,164	22.1	19.1	1.16	17	1990
Adolescent Risk Behavior						
Not in School or Employed	273	11.9	9.6	1.24	33	1990
Pregnancy (Ages 14 - 17)	65	5.8	4.8	1.21	31	1994
Alcohol Use (High School)	495	31.1	37.4	0.83	5	1992-93
Drug Use (High School)	86	5.4	12.8	0.42	6	1992-93
Binge Drinking (5 or more drinks)	201	12.6	16.3	0.77	11	1992-93
Delinquency (ages 15 - 17)	137	8.3	6.4	1.30	38	1994-95

* 1 = "best" 46 = "worst"

COLLETON TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	48	8.2	1.24	1992	47	8.2	1.24	1993	50	8.8	1.21	1994
Births to Mothers Not Completing High School	177	30.2	1.28	1992	164	28.8	1.29	1993	146	25.8	1.18	1994
Births to Single Mothers	230	39.2	1.29	1992	206	36.1	1.19	1993	229	40.5	1.33	1994
Children in Single-Parent Families		14.0	0.97	1970		19.0	1.01	1980	2,255	27.0	1.08	1990
Economic Status												
Poor Children		45.5	1.59	1969		32.4	1.53	1979	2,925	29.3	1.40	1989
Mean Income of Families with Children					27,528	N/A	1.20	1979	29,365	N/A	1.21	1989
Health												
Less than Adequate Prenatal Care	199	34.0	0.86	1992	186	32.6	0.92	1993	176	31.2	0.98	1994
Low Birth Weight	56	9.6	1.07	1992	54	9.5	1.02	1993	51	9.0	0.98	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	201	33.0	1.24	1990-91	225	38.8	1.40	1992-93	217	39.4	1.40	1994-95
1st Grade Failures	61	10.1	1.12	1991-92	40	7.2	0.74	1992-93	31	5.0	0.74	1994-95
Failures Grades 1-3 (approx. %)	76	12.9	0.91	1991-92	77	14.8	1.03	1992-93	79	13.5	1.19	1994-95
Overage for Grade 3	120	22.3	0.86	1991-92	109	19.1	0.93	1993-94	114	22.7	1.40	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	115	21.9	1.13	1991-92	124	24.1	1.22	1993-94	187	35.7	1.28	1995-96*
Grade 8 BSAP - Math (Below Standards)	156	30.4	1.13	1991-92	204	43.5	1.41	1993-94	205	42.4	1.22	1995-96
Grade 8 BSAP - Reading (Below Standards)	140	27.2	1.11	1991-92	141	30.1	1.05	1993-94	143	29.5	1.02	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	170	31.8	1.45	1991-92	164	31.6	1.30	1993-94	200	36.2	1.23	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	219	49.9	1.60	1991-92	193	45.8	1.40	1993-94	177	44.4	1.26	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	65	5.9	1.26	1992	58	5.2	1.16	1993	65	5.8	1.21	1994
Alcohol Use (High School)	535	32.9	0.82	1989-90					495	31.1	0.83	1992-93
Drug Use (High School)	167	10.3	0.77	1989-90					86	5.4	0.42	1992-93
Binge Drinking (5 or more drinks)		13.0	0.83	1989-90					201	12.6	0.77	1992-93

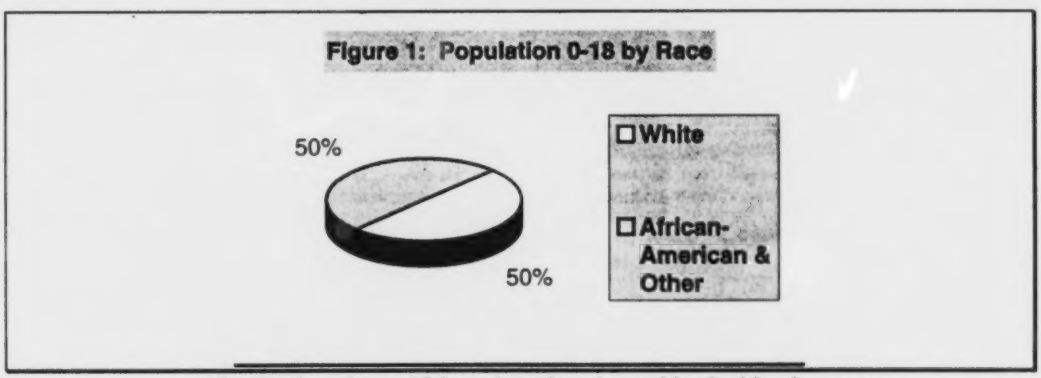
SOUTH CAROLINA kids count

1996 Report DARLINGTON

DEMOGRAPHICS

In 1994, there were 17,990 children under age 18 in the county. Of these, 8,960 were White and 9,030 were African-American and Other races. There were 20,730 children under age 18 in 1980, 20,883 in 1970, and 23,860 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 27.8% of the population in 1994, down from 45.1% in 1960, 39.1% in 1970 and 33.1% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 36.5% of all households in 1990, as compared with 50.0% of households in 1960, had children below the age of 18.

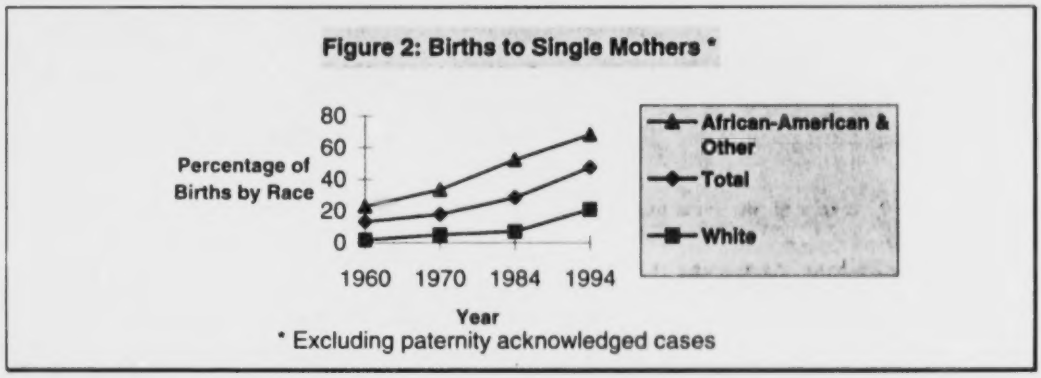
Births to Teen Mothers: In 1994, 97 babies were born to mothers younger than age 18. These babies were 10.5% of all children born in the county; 6.2% of all White babies and 13.9% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 81.4% were born to single mothers.

In 1994, 239 babies were born to mothers younger than age 20. These babies were 25.9% of all children born in the county; 17.1% of all White babies and 32.8% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 77.0% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 288 babies, 31.2% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 51.4% in 1970.

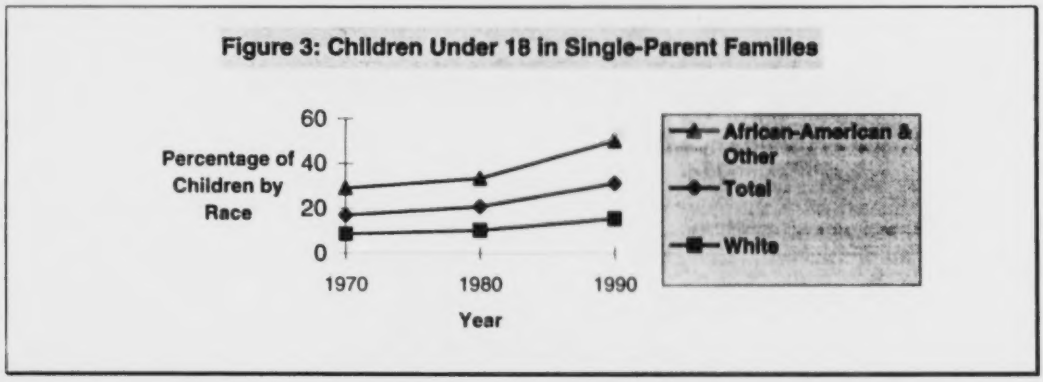
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 436 babies, 47.3% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 28.3% and in 1960 it was 13.1%. In 1994, 20.8% of White children and 68.0% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 44 babies, 4.8% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 480, constituting 52.1% of all babies, 25.5% of White babies, and 72.8% of African-American and Others.



Divorce Rate: In 1994, 484 marriage licenses were issued, while 343 divorce decrees involving 312 children were filed. In 1970 only 114 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 4,507 children lived with only one parent. This was 31.1% of all children, up from 20.8% in 1980 and 17.0% in 1970. In 1990, 15.4% of White children and 50.1% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 63.9% of mothers with children under 6 and 74.8% with children 6 - 17 were in the labor force. This has increased substantially from 40.9% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 1,407 children investigated as alleged child abuse and neglect victims: 26.3% for physical abuse, 6.8% for sexual abuse, 75.0% for neglect, and 14.6% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 150 children were victims of abuse and neglect: of these 46.7% were male and 53.3% were female; 39.3% were White, and 60.7% were African-American and Other. By age, 45.3% were 0 - 5, 42.0% were 6 - 12, and 12.7% were 13 - 17. They constituted 0.8% of all children age 18 or younger; 0.7% of all Whites and 1.0% of all African-Americans and Others. In the verified cases, 6.7% of abused and neglected children lived in two parent families, 20.7% in single parent families, 2.7% with extended families, and 70.0% in other circumstances.

Family Violence: In 1994, 327 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 21.0% of all assaults, which include both simple and aggravated assaults. Overall, 49.2% of all domestic assaults involve spouse abuse (constituting 10.2% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 6.7% of all children did not live with their natural parents; of these, 671 or 3.8% of children lived with relatives, 355 or 2.0% lived with non-relatives, and 139 were in institutional facilities.

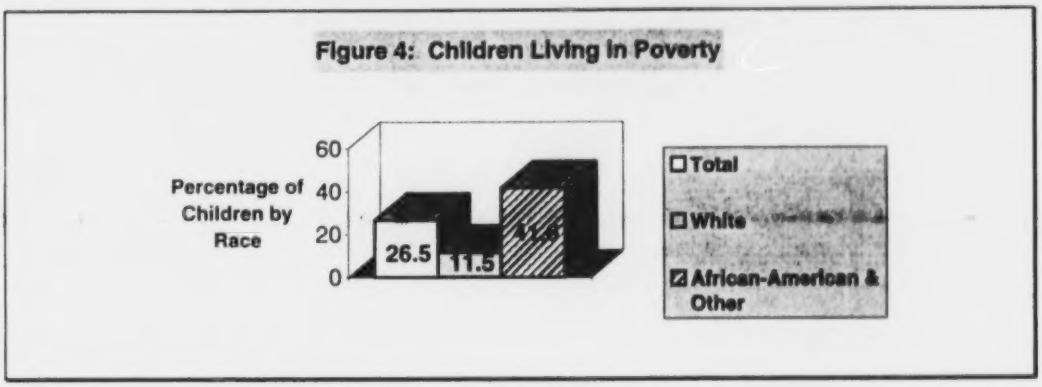
Out of Home Placements: As of September 30, 1996, 56 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 23.2% 0-2, 19.6% 3-5, 25.0% 6-10, 7.1% 11-13, and 25.0% 14 and above. The foster care population is comprised of 66.1% males and 33.9% females. Regarding their future, 10.7% were under a plan for placement in adoptive homes, 60.7% for return to a parent or guardian, 0.0% for placement with a relative, 10.7% for independent living, 17.9% for permanent foster care, and 0.0% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.6 adults for every person below age 18. This was up substantially from 1960, when there were only 1.22 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 4,529 children and youth under the age of 18 lived in families with incomes below poverty. Over 26.5% of all children and youth lived below poverty: 11.5% of Whites and 41.6% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 26.5% in 1989, it was 29.4% in 1979 and 36.4% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 29.3% of children 0 - 5 and 25.3% of children 6 - 17 lived in poverty; 28.5% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 51.0% of children in single-parent families lived in poverty, but only 12.5% of children in married-couple families were poor. Children in single-parent families made up 67.9% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 5,728 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 1,199 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	17,092	4,529	5,728	6,909	8,318	8,804	9,471
Percent		26.5%	33.5%	40.4%	48.7%	51.5%	55.4%
White	8,590	988	1,352	1,790	2,405	2,648	3,023
Percent		11.5%	15.7%	20.8%	28.0%	30.8%	35.2%
African-American and Other	8,502	3,541	4,376	5,119	5,913	6,156	6,448
Percent		41.6%	51.5%	60.2%	69.5%	72.4%	75.8%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 14.5% of households did not have a car; 7.3% of Whites and 27.6% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 10.8% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 25.9% of households had no phone.

Income: The mean income of families with children in 1989 was $31,617; in 1979, it had been $30,493, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 6.5%.

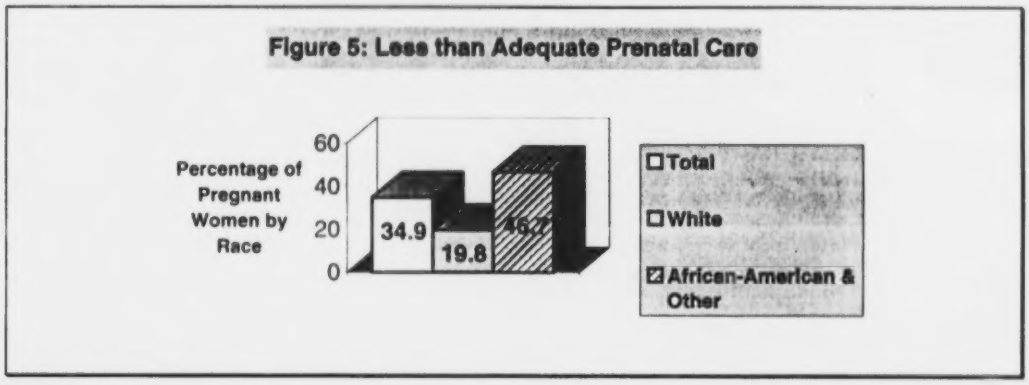
The mean income of single-parent families with children was $13,688 in 1989, as compared with $38,838 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 1,479 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 44.6% had child support court orders. The average monthly payment of child support was $132.06, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 681 parents in non-AFDC families were obligated to pay a monthly average of $147.73. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 245 or 26.6% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 322 or 34.9% of pregnant women received less than adequate prenatal care: 80 or 19.8% of Whites and 242 or 46.7% of African-Americans and Others. In that same year, 15 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 107 or 11.6% of all babies in the county were born with low birthweight. Over 15.1% of African-American babies and 7.2% of White babies were born with low birthweight. During 1992-94, approximately 65 or 2.3% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 12.3%. For Whites, the rate decreased by 16.8%, while for African-Americans and Others, the rate decreased by 15.3%. Over the three-year period 1992-94, 12 White and 29 African-American and Other infants died before age one. By comparison, 15 White and 28 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 5 White and 10 African-American and Other children ages 1-14 died in the county. During 1982-84, 14 White and 8 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 48.5% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 18.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 754 to 1,131 youth ages 13-19 in the county were infected with a STD. In the county, there were 4 reported cases of children under age 15 and 106 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 11.9% first smoked by age 11, 26.3% by age 13, and 38.9% by age 15. In a typical month, 11.9% of 7th and 8th graders and 19.9% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 30.0% of White 7th to 12th graders used cigarettes, in comparison with 5.8% African-Americans. A smaller but significant group of high school students (6.7%) used smokeless tobacco monthly; it was used primarily by White males (26.2%) compared with 0.7% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 1,799 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 711 students in grades 1-12 with learning disabilities and 249 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 1,235 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 2,663 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 15 nurses; 5 are currently available.

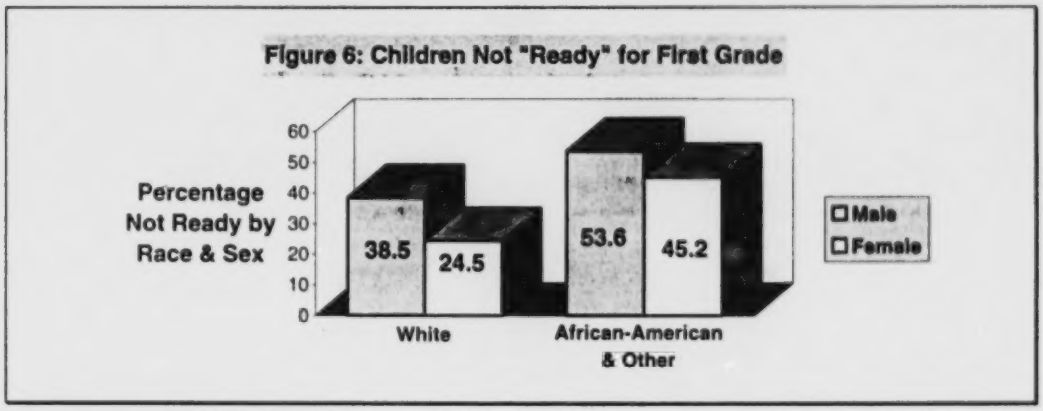
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 44.9% for Whites and 47.0% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

377 children not ready	41.8% children not ready

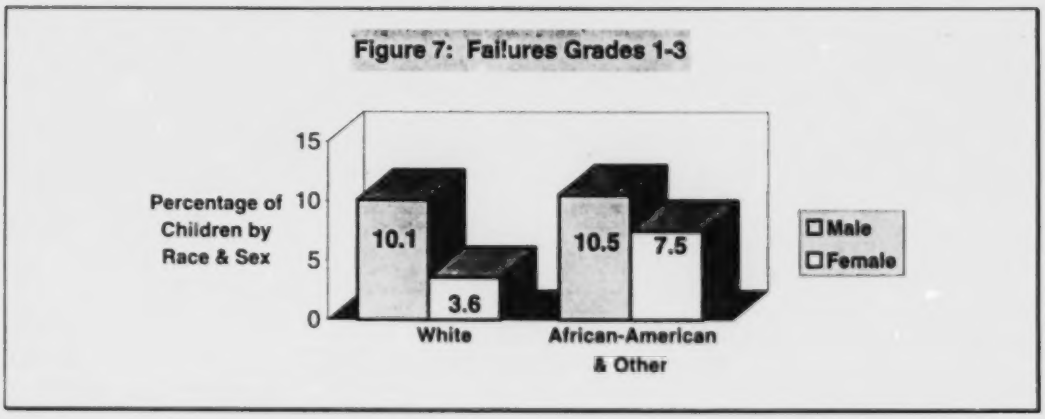


1st Grade Failures in 1995:

46 children failing	5.4% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

70 children failing	8.2% children failing



Overage for Grade 3 in 1996:

79 children overage	10.5% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 320 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 19.8% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 41.8% assessed not ready for the 1st grade, 10.5% overage in grade 3, and 19.8% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

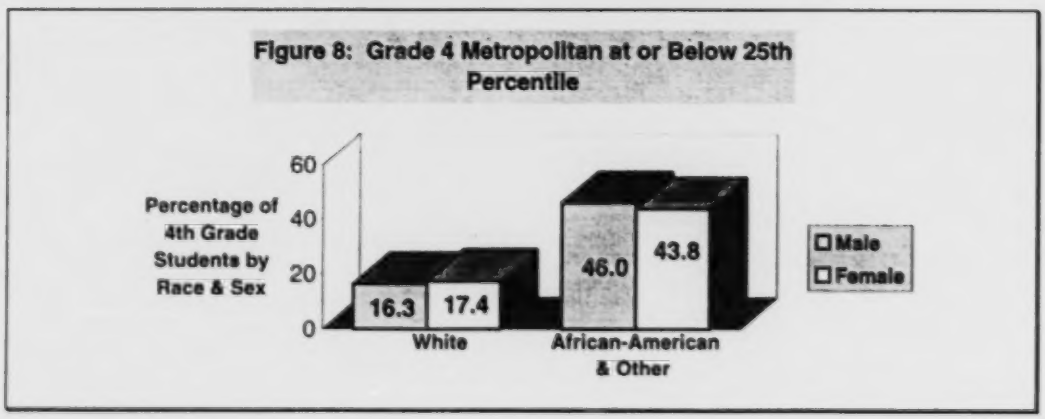
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 249 speech and language impaired, 711 learning disabled, 23 emotionally disabled, 537 mentally impaired, and 104 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 16.3% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

223 children at or below 25th percentile	31.5% children at or below 25th percentile



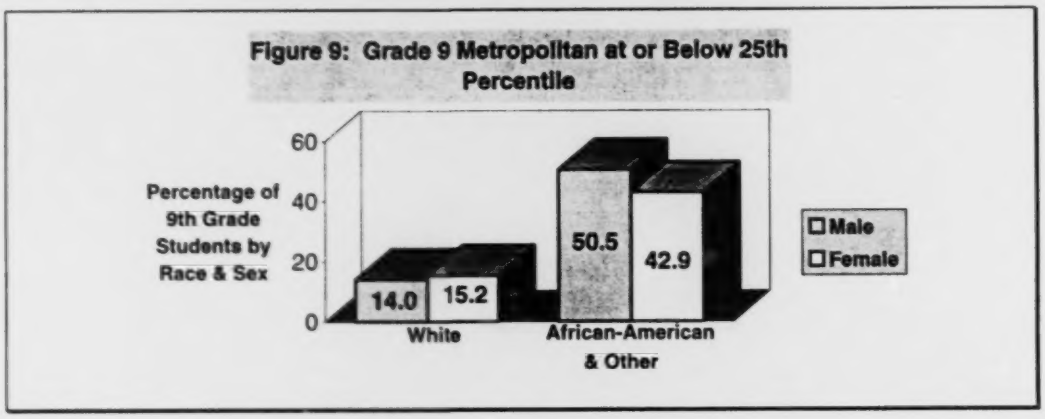
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	286	34.8	273	33.3
White Males	33	17.1	47	24.1
White Females	49	24.7	33	16.8
African-American & Other Males	107	50.2	113	53.6
African-American & Other Females	97	44.3	80	36.5

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

260 students at or below 25th percentile

31.6% students at or below 25th percentile

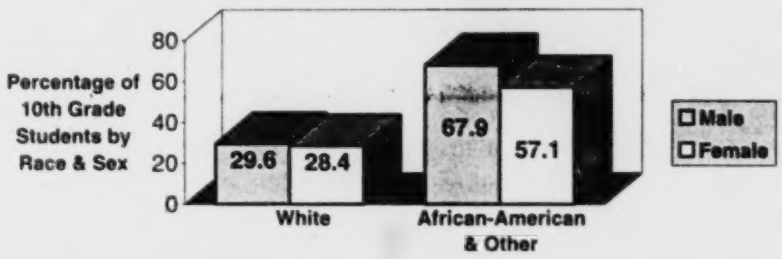


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

333 students not passing all parts

47.2% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam

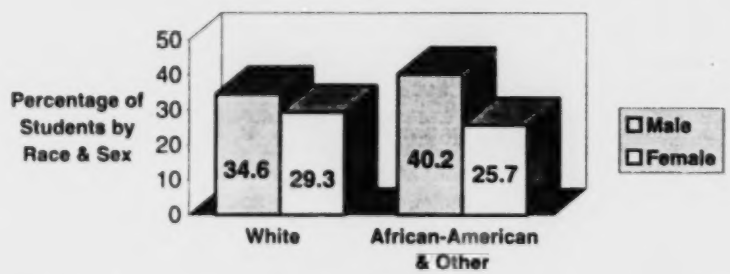


Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 64.7% to 33.8% in math and from 55.2% to 33.1% in reading. During the 1990s the trend altered, with 34.8% not meeting 8th grade math standards in 1996 and 33.3% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 33.3% in 1983 on the CTBS, 38.7% in 1990 on the Stanford, and 31.7% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 36.3% in 1990 and 35.9% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

1,396 students drop out	32.8% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 29.3% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 32.5% during 1985-89, and 35.5% during 1990-94. During the 1995-96 period, 94.3% of all who did graduate received the State High School Diploma, while 3.7% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 2.0% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 29 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 94 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 23.6% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 31.5% to 47.2%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 609 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 14.2% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

12.5%	White Males	14.4%	African-American & Other Males
7.4%	White Females	22.7%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 104 girls between the ages of 14 and 17 became pregnant in 1993 and 109 in 1994. In 1994, this represented 5.1% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 3.1% for Whites and 7.2% for African-Americans and others. Of all pregnancies to 14-17 year olds, 87.2% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 9.3%.

Alcohol Use: In 1992-93, 17.8% of 7th and 8th graders and 35.3% of high schoolers said they had used alcohol in the past month. Of White males, 35.4% had used it in the past month, compared with 31.6% of African-American males; likewise, 29.9% of White females said they had used alcohol, compared with 19.2% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 13.6% had used alcohol by age 11 or younger, 31.6% by age 13, and 53.8% by age 15.

During the previous year, 31.8% of 7th and 8th graders and 43.8% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 27.0% said they had driven after drinking, and 9.5% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 49.5% of eighth graders and 84.7% of seniors felt that beer was easy to get; 53.9% of eighth graders and 46.3% of seniors felt there was not a great risk in using it regularly.

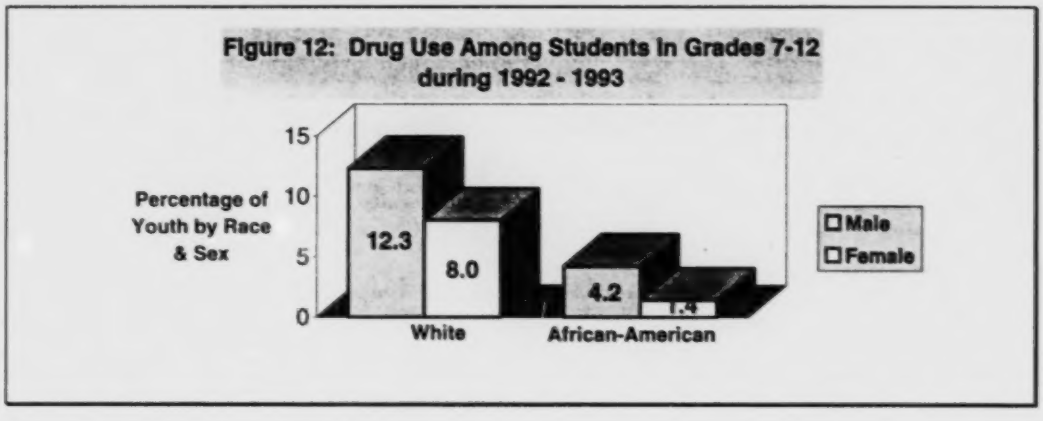
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 26.6% of all high school students in 1992-93 responded 3 or more drinks at a time; 16.0% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 3.8% of 7th and 8th graders and 7.6% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (12.3%) and White females (8.0%); use among African-American males was 4.2%; African-American females, 1.4%. Some young people first used drugs at an early age: among students 15 and older, 2.2% experienced their first use by age 11 or sooner; 5.3% had used a drug by age 13, and 11.3% by age 15.

Of seniors who had initiated use of marijuana, 9.5% had started use at home, 31.8% at a friend's home, and 58.7% elsewhere. During the past year, 2.3% of all high school students said that they used marijuana at home, 5.5% at a friend's house, and 4.8% in a car. In the past year, 5.1% of all high school students who drive and 6.5% of seniors who drive said that they had driven after using drugs . Furthermore, 4.3% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 23.9% of 8th graders who had an opinion said it is easy to get marijuana and 21.1% said it is easy to get cocaine or crack; 66.9% of seniors who had an opinion said it is easy to get marijuana and 62.2% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 12.3% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 411 individual juvenile offenders in the county were referred to the Solicitor; of these, 6.6% were age 12 or younger, 31.4% were 13 or 14, and 61.6% were 15 or older.

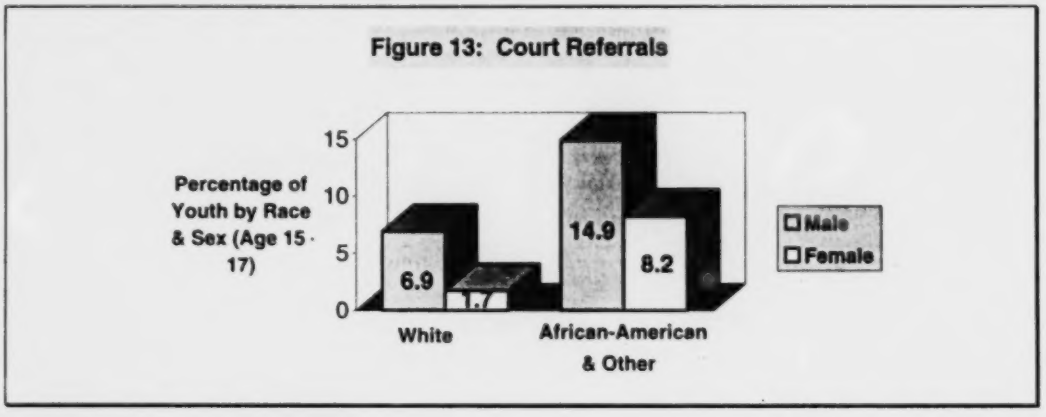
Of the referrals to the family court, 18.2% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 91 juvenile cases constituting 17.4% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 44.8% lived in families with income under $10,000, 35.2% with $10,000-$19,999 and 20.1% with $20,000 or more. Furthermore, only 22.0% of delinquents lived with both natural parents, while 49.6% lived in a single parent household and 28.4% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 32.5% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 25.1% had at least one prior referral and 6.8% had been referred to court 3 times or more.

In 1994-95, there were 23 juvenile commitments from the county to State institutions.

During 1994-95, 253 youth ages 15 to 17 were referred to the family courts. In the county, 7.9% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 36 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 13 deaths between 1990 and 1994; homicides killed 6 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 31.1% of children in single-parent families, 26.5% in poverty, 32.8% dropping out of school, 35.3% of high school students using alcohol and 12.3% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

Dr. A. Baron Holmes (803-734-2291) E-mail bholmes@ogc.state.sc.us
-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

DARLINGTON

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	97	10.5	7.3	1.44	36	1994
Births to Mothers Not Completing High School	288	31.2	21.8	1.43	41	1994
Births to Single Mothers	436	47.3	30.4	1.56	40	1994
Children in Single-Parent Families	4,507	31.1	25.1	1.24	36	1990
Parents Working	5,116	71.7	74.3	0.97	10	1990
Abuse & Neglect Victims	150	0.8	1.0	0.80	12	1995-96
Separation from Parents	1,165	6.7	5.1	1.31	35	1990
Economic Status						
Poor Children	4,529	26.5	21.0	1.26	29	1989
Mean Income of Families with Children	$31,617	NA	NA	0.89	24	1989
Health						
Less than Adequate Prenatal Care	322	34.9	32.0	1.09	28	1994
Low Birth Weight	107	11.6	9.2	1.26	38	1994
Not Adequately Immunized	249	18.0	18.0	1.00	35	1995
Cigarette Smokers (High School)	637	19.9	23.1	0.86	20	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	377	41.8	28.1	1.49	46	1994-95
1st Grade Failures	46	5.4	6.8	0.79	15	1994-95
Failures grades 1-3 (approx. %)	70	8.2	11.3	0.73	10	1994-95
Overage for Grade 3	79	10.5	16.2	0.65	7	1995-96
Special Education (ages 8 and 9)	320	19.8	15.3	1.29	41	1995-96
School Achievement						
Special Education Grades 1 - 12	1,624	16.3	13.0	1.25	40	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	223	31.5	27.9	1.13	22	1995-96
Grade 8 BSAP - Math (Below standards)	286	34.8	34.8	1.00	18	1995-96
Grade 8 BSAP - Reading (Below standards)	273	33.3	28.8	1.16	27	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	260	31.6	29.5	1.07	20	1995-96
Exit Exam (Not passing all parts on 1st attempt)	333	47.2	35.3	1.34	35	1995-96
Dropout Rate	1,396	32.8	27.3	1.20	37	1992-95
25-34 Year olds with no HS Degree or GED	2,246	23.6	19.1	1.24	23	1990
Adolescent Risk Behavior						
Not in School or Employed	609	14.2	9.6	1.48	42	1990
Pregnancy (Ages 14 - 17)	109	5.1	4.8	1.06	22	1994
Alcohol Use (High School)	1,130	35.3	37.4	0.94	19	1992-93
Drug Use (High School)	243	7.6	12.8	0.59	15	1992-93
Binge Drinking (5 or more drinks)	512	16.0	16.3	0.98	23	1992-93
Delinquency (ages 15 - 17)	253	7.9	6.4	1.23	36	1994-95

* 1 = "best" 46 = "worst"

DARLINGTON TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	97	9.7	1.47	1992	91	9.7	1.47	1993	97	10.5	1.44	1994
Births to Mothers Not Completing High School	302	30.4	1.29	1992	287	30.6	1.37	1993	288	31.2	1.43	1994
Births to Single Mothers	443	44.5	1.47	1992	411	43.8	1.45	1993	436	47.3	1.56	1994
Children in Single-Parent Families		17.0	1.17	1970		20.8	1.10	1980	4,507	31.1	1.24	1990
Economic Status												
Poor Children		36.4	1.27	1969		29.4	1.39	1979	4,529	26.5	1.26	1989
Mean Income of Families with Children					30,493	N/A	1.08	1979	31,617	N/A	1.12	1989
Health												
Less than Adequate Prenatal Care	487	48.9	1.24	1992	415	44.2	1.25	1993	322	34.9	1.09	1994
Low Birth Weight	108	10.9	1.21	1992	118	12.6	1.35	1993	107	11.6	1.26	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	299	33.9	1.27	1990-91	258	30.7	1.10	1992-93	377	41.8	1.49	1994-95
1st Grade Failures	38	4.5	0.50	1991-92	42	5.4	0.56	1992-93	46	5.4	0.79	1994-95
Failures Grades 1-3 (approx. %)	62	7.4	0.52	1991-92	62	8.1	0.57	1992-93	70	8.2	0.73	1994-95
Overage for Grade 3	144	16.6	0.64	1991-92	80	10.2	0.50	1993-94	79	10.5	0.65	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	240	27.4	1.42	1991-92	127	17.8	0.90	1993-94	223	31.5	1.13	1995-96*
Grade 8 BSAP - Math (Below Standards)	294	31.9	1.18	1991-92	313	35.3	1.14	1993-94	286	34.8	1.00	1995-96
Grade 8 BSAP - Reading (Below Standards)	237	25.6	1.05	1991-92	304	34.5	1.20	1993-94	273	33.3	1.16	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	315	28.9	1.32	1991-92	277	29.1	1.20	1993-94	260	31.6	1.07	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	325	39.8	1.28	1991-92	323	41.1	1.26	1993-94	333	47.2	1.34	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	110	5.3	1.13	1992	104	5.1	1.13	1993	109	5.1	1.06	1994
Alcohol Use (High School)	1,308	40.0	1.00	1989-90					1,130	35.3	0.94	1992-93
Drug Use (High School)	388	11.9	0.89	1989-90					243	7.6	0.59	1992-93
Binge Drinking (5 or more drinks)		14.0	0.90	1989-90					512	16.0	0.98	1992-93

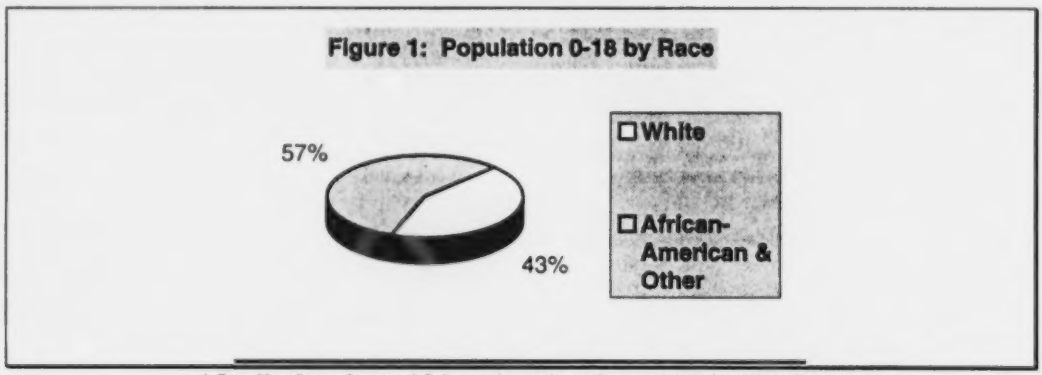
SOUTH CAROLINA kids count

1996 Report DILLON

DEMOGRAPHICS

In 1994, there were 9,200 children under age 18 in the county. Of these, 3,960 were White and 5,250 were African-American and Other races. There were 11,210 children under age 18 in 1980, 12,454 in 1970, and 14,955 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 31.0% of the population in 1994, down from 48.9% in 1960, 43.2% in 1970 and 36.1% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 38.3% of all households in 1990, as compared with 50.0% of households in 1960, had children below the age of 18.

Births to Teen Mothers: In 1994, 73 babies were born to mothers younger than age 18. These babies were 14.1% of all children born in the county; 9.8% of all White babies and 17.2% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 90.4% were born to single mothers.

In 1994, 147 babies were born to mothers younger than age 20. These babies were 28.4% of all children born in the county; 17.7% of all White babies and 36.1% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 82.3% were born to single mothers.

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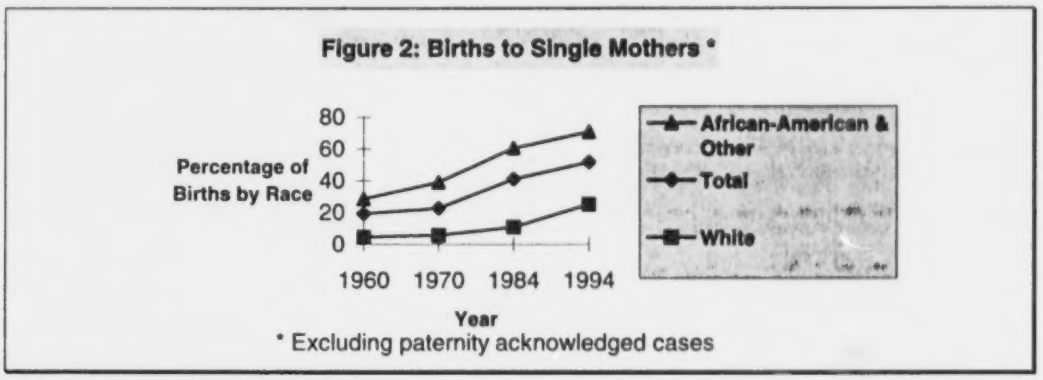
Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 182 babies, 35.2% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 62.1% in 1970.

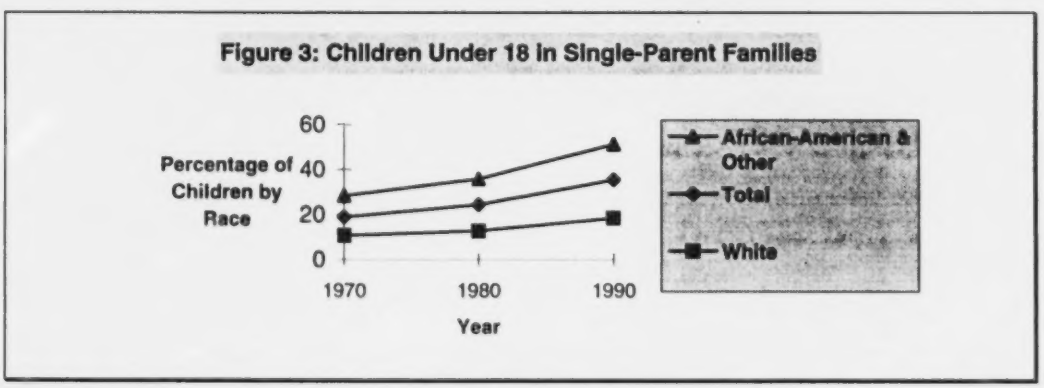
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 267 babies, 51.6% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 40.8% and in 1960 it was 19.1%. In 1994, 25.1% of White children and 70.5% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 25 babies, 4.8% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 292, constituting 56.5% of all babies, 30.2% of White babies, and 75.2% of African-American and Others.



Divorce Rate: In 1994, 6,073 marriage licenses were issued, while 97 divorce decrees involving 70 children were filed. In 1970 only 35 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 2,614 children lived with only one parent. This was 35.3% of all children, up from 24.3% in 1980 and 18.9% in 1970. In 1990, 18.3% of White children and 51.1% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 70.8% of mothers with children under 6 and 77.5% with children 6 - 17 were in the labor force. This has increased substantially from 47.3% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 525 children investigated as alleged child abuse and neglect victims: 21.5% for physical abuse, 10.1% for sexual abuse, 67.6% for neglect, and 50.7% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 164 children were victims of abuse and neglect: of these 53.0% were male and 47.0% were female; 34.8% were White, and 65.2% were African-American and Other. By age, 52.4% were 0 - 5, 34.1% were 6 - 12, and 13.4% were 13 - 17. They constituted 1.8% of all children age 18 or younger; 1.4% of all Whites and 2.0% of all African-Americans and Others. In the verified cases, 38.4% of abused and neglected children lived in two parent families, 53.7% in single parent families, 1.2% with extended families, and 6.7% in other circumstances.

Family Violence: In 1994, 292 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 26.0% of all assaults, which include both simple and aggravated assaults. Overall, 48.6% of all domestic assaults involve spouse abuse (constituting 12.7% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 5.9% of all children did not live with their natural parents; of these, 462 or 5.0% of children lived with relatives, 86 or 0.9% lived with non-relatives, and 0 were in institutional facilities.

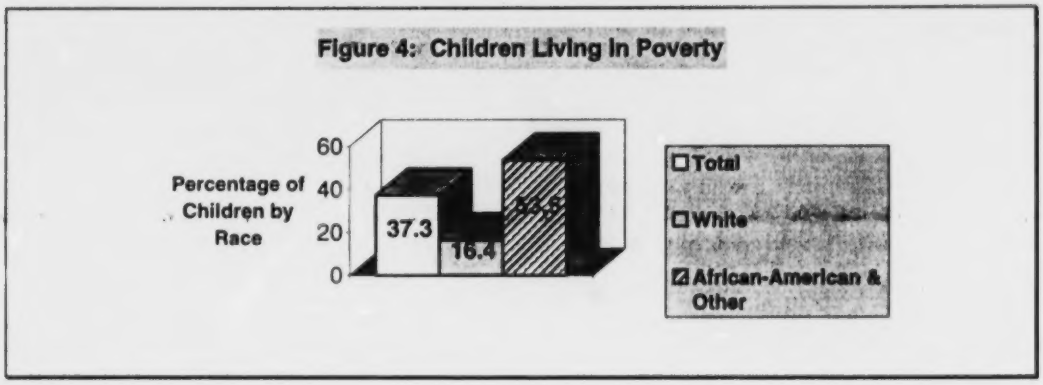
Out of Home Placements: As of September 30, 1996, 43 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 16.3% 0-2, 20.9% 3-5, 27.9% 6-10, 16.3% 11-13, and 18.6% 14 and above. The foster care population is comprised of 60.5% males and 39.5% females. Regarding their future, 30.2% were under a plan for placement in adoptive homes, 41.9% for return to a parent or guardian, 9.3% for placement with a relative, 7.0% for independent living, 11.6% for permanent foster care, and 0.0% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.23 adults for every person below age 18. This was up substantially from 1960, when there were only 1.05 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 3,435 children and youth under the age of 18 lived in families with incomes below poverty. Over 37.3% of all children and youth lived below poverty: 16.4% of Whites and 53.5% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 37.3% in 1989, it was 37.6% in 1979 and 48.4% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 37.9% of children 0 - 5 and 37.1% of children 6 - 17 lived in poverty; 36.8% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 66.6% of children in single-parent families lived in poverty, but only 19.6% of children in married-couple families were poor. Children in single-parent families made up 65.8% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 4,327 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 892 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	9,201	3,435	4,327	4,840	5,477	5,734	6,008
Percent		37.3%	47.0%	52.6%	59.5%	62.3%	65.3%
White	4,010	658	954	1,086	1,381	1,557	1,697
Percent		16.4%	23.8%	27.1%	34.4%	38.8%	42.3%
African-American and Other	5,191	2,777	3,373	3,754	4,096	4,177	4,311
Percent		53.5%	65.0%	72.3%	78.9%	80.5%	83.0%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 17.4% of households did not have a car; 10.8% of Whites and 28.0% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 16.3% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 30.1% of households had no phone.

Income: The mean income of families with children in 1989 was $27,055; in 1979, it had been $25,159, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 10.2%.

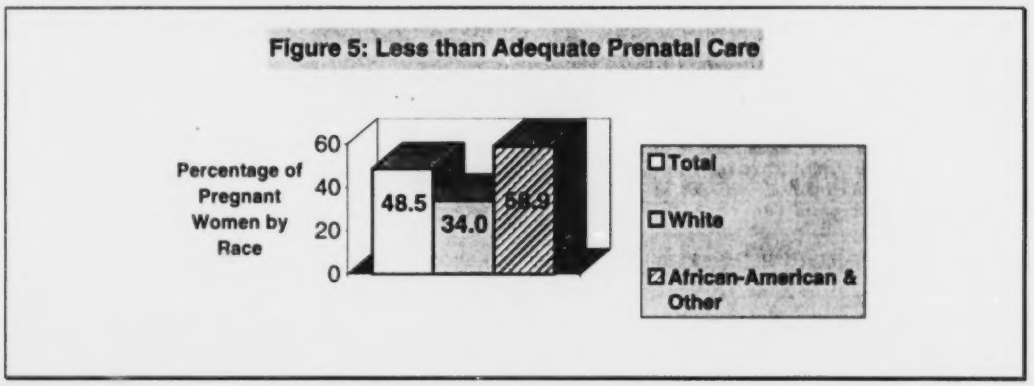
The mean income of single-parent families with children was $10,783 in 1989, as compared with $33,601 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 849 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 48.5% had child support court orders. The average monthly payment of child support was $136.68, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 435 parents in non-AFDC families were obligated to pay a monthly average of $141.66. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 225 or 43.5% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 251 or 48.5% of pregnant women received less than adequate prenatal care: 73 or 34.0% of Whites and 178 or 58.9% of African-Americans and Others. In that same year, 16 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 53 or 10.3% of all babies in the county were born with low birthweight. Over 12.3% of African-American babies and 7.4% of White babies were born with low birthweight. During 1992-94, approximately 28 or 1.8% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 58.3%. For Whites, the rate decreased by 86.9%, while for African-Americans and Others, the rate decreased by 45.3%. Over the three-year period 1992-94, 1 White and 9 African-American and Other infants died before age one. By comparison, 8 White and 17 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 2 White and 7 African-American and Other children ages 1-14 died in the county. During 1982-84, 4 White and 9 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 62.2% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 9.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 357 to 536 youth ages 13-19 in the county were infected with a STD. In the county, there were 3 reported cases of children under age 15 and 37 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 11.9% first smoked by age 11, 27.1% by age 13, and 38.7% by age 15. In a typical month, 13.4% of 7th and 8th graders and 19.4% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 31.1% of White 7th to 12th graders used cigarettes, in comparison with 7.2% African-Americans. A smaller but significant group of high school students (2.2%) used smokeless tobacco monthly; it was used primarily by White males (7.5%) compared with 0.8% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 920 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 132 students in grades 1-12 with learning disabilities and 211 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 622 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 1,362 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 8 nurses; 5 are currently available.

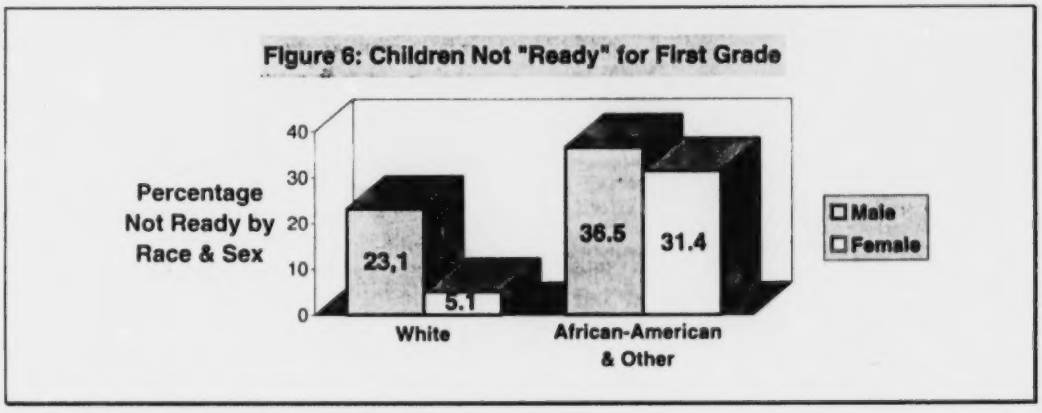
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 55.2% for Whites and 55.1% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

148 children not ready	27.5% children not ready

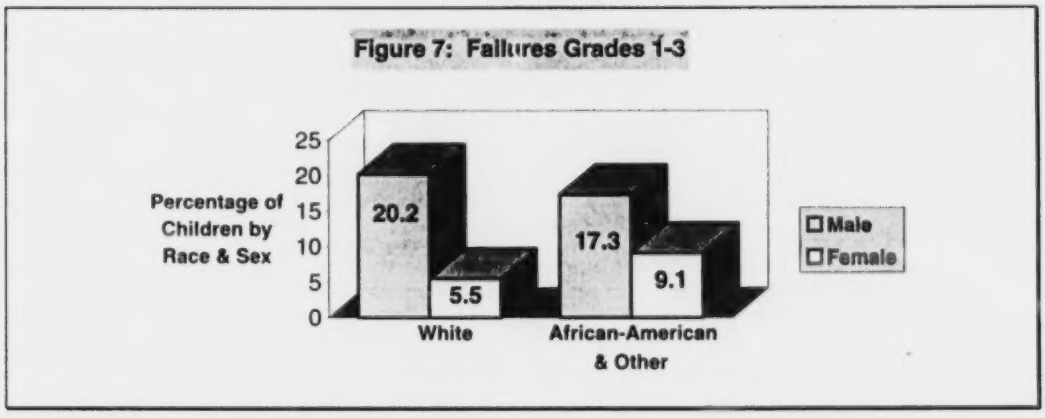


1st Grade Failures in 1995:

49 children failing	9.2% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

71 children failing	13.4% children failing



Overage for Grade 3 in 1996:

94 children overage	18.9% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 118 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 12.0% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 27.5% assessed not ready for the 1st grade, 18.9% overage in grade 3, and 12.0% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

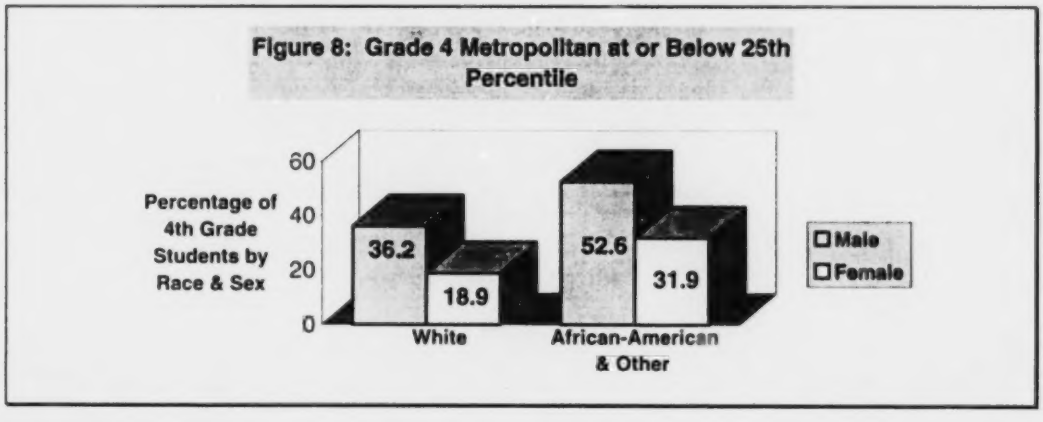
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 211 speech and language impaired, 132 learning disabled, 17 emotionally disabled, 240 mentally impaired, and 18 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 10.7% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

169 children at or below 25th percentile	36.3% children at or below 25th percentile



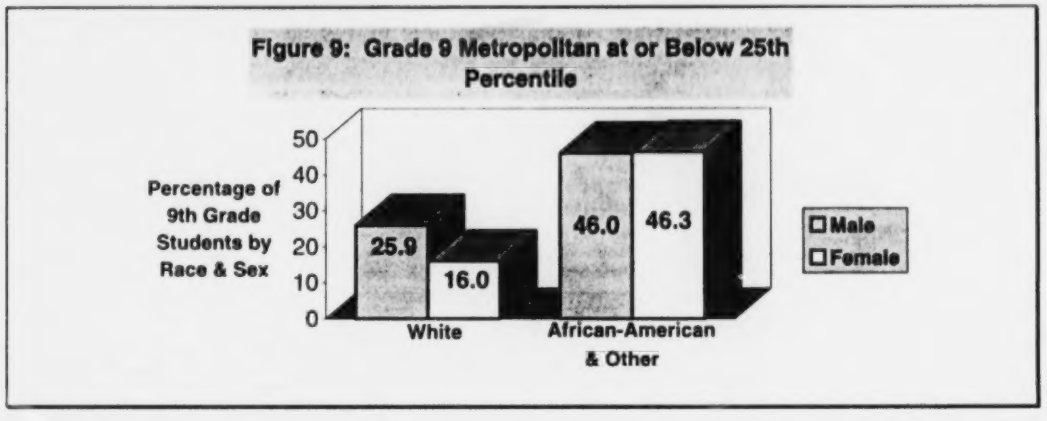
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	218	42.9	241	47.3
White Males	32	27.6	46	39.7
White Females	31	30.1	27	26.0
African-American & Other Males	84	55.6	100	65.8
African-American & Other Females	71	51.8	68	49.6

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

153 students at or below 25th percentile

36.4% students at or below 25th percentile

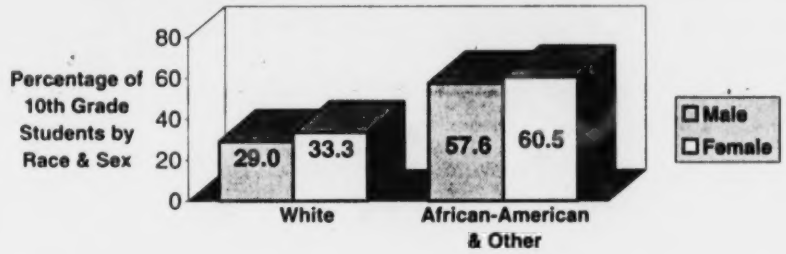


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

213 students not passing all parts

47.3% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



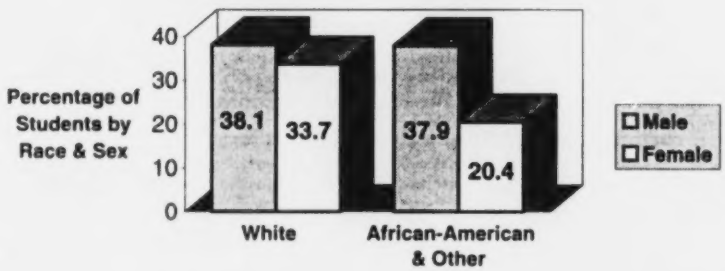
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 63.6% to 35.7% in math and from 61.5% to 38.9% in reading. During the 1990s the trend altered, with 42.9% not meeting 8th grade math standards in 1996 and 47.3% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 32.8% in 1983 on the CTBS, 43.1% in 1990 on the Stanford, and 45.8% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 38.5% in 1990 and 36.5% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

778 students drop out

32.4% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 37.7% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 34.4% during 1985-89, and 37.7% during 1990-94. During the 1995-96 period, 95.5% of all who did graduate received the State High School Diploma, while 2.8% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 1.7% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 13 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 35 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 34.1% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 32.4% to 47.3%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 168 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 8.5% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

1.2%	White Males	10.6%	African-American & Other Males
13.7%	White Females	7.1%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 69 girls between the ages of 14 and 17 became pregnant in 1993 and 76 in 1994. In 1994, this represented 7.8% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 4.9% for Whites and 10.0% for African-Americans and others. Of all pregnancies to 14-17 year olds, 93.4% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it increased by 60.7%.

Alcohol Use: In 1992-93, 14.1% of 7th and 8th graders and 29.3% of high schoolers said they had used alcohol in the past month. Of White males, 33.8% had used it in the past month, compared with 20.5% of African-American males; likewise, 29.2% of White females said they had used alcohol, compared with 15.4% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 11.4% had used alcohol by age 11 or younger, 28.7% by age 13, and 48.6% by age 15.

During the previous year, 35.4% of 7th and 8th graders and 48.7% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 31.4% said they had driven after drinking, and 8.6% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 50.0% of eighth graders and 85.1% of seniors felt that beer was easy to get; 44.5% of eighth graders and 40.1% of seniors felt there was not a great risk in using it regularly.

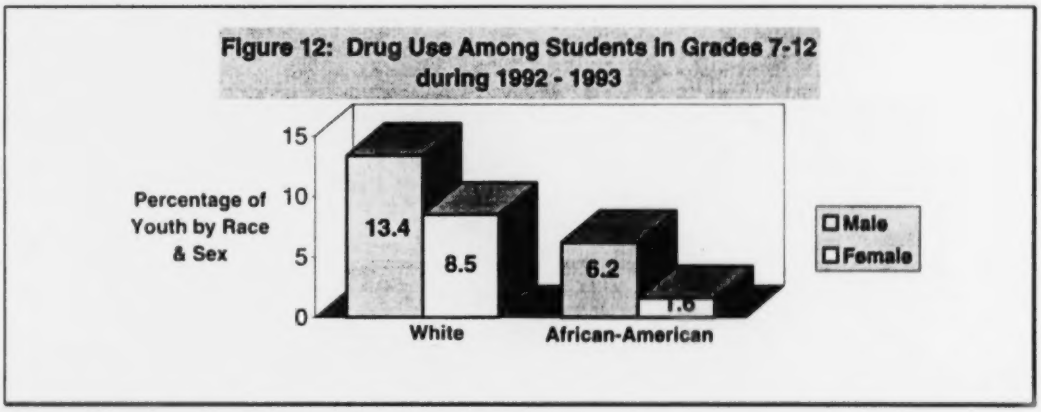
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 21.7% of all high school students in 1992-93 responded 3 or more drinks at a time; 13.0% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 3.3% of 7th and 8th graders and 8.9% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (13.4%) and White females (8.5%); use among African-American males was 6.2%; African-American females, 1.6%. Some young people first used drugs at an early age: among students 15 and older, 2.3% experienced their first use by age 11 or sooner; 6.3% had used a drug by age 13, and 13.0% by age 15.

Of seniors who had initiated use of marijuana, 6.0% had started use at home, 37.1% at a friend's home, and 57.0% elsewhere. During the past year, 2.7% of all high school students said that they used marijuana at home, 6.5% at a friend's house, and 5.4% in a car. In the past year, 5.4% of all high school students who drive and 6.2% of seniors who drive said that they had driven after using drugs . Furthermore, 3.9% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 25.3% of 8th graders who had an opinion said it is easy to get marijuana and 19.9% said it is easy to get cocaine or crack; 76.8% of seniors who had an opinion said it is easy to get marijuana and 67.6% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 14.4% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 142 individual juvenile offenders in the county were referred to the Solicitor; of these, 12.0% were age 12 or younger, 32.4% were 13 or 14, and 55.6% were 15 or older.

Of the referrals to the family court, 17.3% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 24 juvenile cases constituting 12.2% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

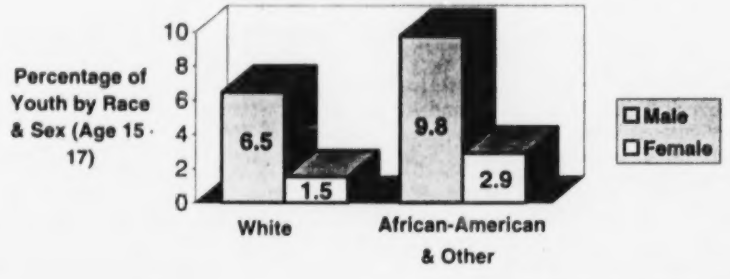
Delinquents are likely to live in families with low income: 40.2% lived in families with income under $10,000, 46.5% with $10,000-$19,999 and 13.4% with $20,000 or more. Furthermore, only 16.4% of delinquents lived with both natural parents, while 57.0% lived in a single parent household and 26.6% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 44.5% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 31.0% had at least one prior referral and 15.5% had been referred to court 3 times or more.

In 1994-95, there were 13 juvenile commitments from the county to State institutions.

During 1994-95, 78 youth ages 15 to 17 were referred to the family courts. In the county, 5.3% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.

Figure 13: Court Referrals



Deaths: During 1990-94, 18 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 8 deaths between 1990 and 1994; homicides killed 8 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 35.3% of children in single-parent families, 37.3% in poverty, 32.4% dropping out of school, 29.3% of high school students using alcohol and 14.4% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

Dr. A. Baron Holmes (803-734-2291) E-mail bholmes@ogc.state.sc.us
-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

DILLON

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	73	14.1	7.3	1.93	46	1994
Births to Mothers Not Completing High School	182	35.2	21.8	1.61	46	1994
Births to Single Mothers	267	51.6	30.4	1.70	43	1994
Children in Single-Parent Families	2,614	35.3	25.1	1.41	43	1990
Parents Working	2,394	75.7	74.3	1.02	26	1990
Abuse & Neglect Victims	164	1.8	1.0	1.80	43	1995-96
Separation from Parents	548	5.9	5.1	1.16	26	1990
Economic Status						
Poor Children	3,435	37.3	21.0	1.78	40	1989
Mean Income of Families with Children	$27,055	NA	NA	0.76	40	1989
Health						
Less than Adequate Prenatal Care	251	48.5	32.0	1.52	44	1994
Low Birth Weight	53	10.3	9.2	1.12	29	1994
Not Adequately Immunized	78	9.0	18.0	0.50	13	1995
Cigarette Smokers (High School)	321	19.4	23.1	0.84	18	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	148	27.5	28.1	0.98	20	1994-95
1st Grade Failures	49	9.2	6.8	1.35	29	1994-95
Failures grades 1-3 (approx. %)	71	13.4	11.3	1.19	25	1994-95
Overage for Grade 3	94	18.9	16.2	1.17	31	1995-96
Special Education (ages 8 and 9)	118	12.0	15.3	0.78	7	1995-96
School Achievement						
Special Education Grades 1 - 12	618	10.7	13.0	0.82	5	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	169	36.3	27.9	1.30	31	1995-96
Grade 8 BSAP - Math (Below standards)	218	42.9	34.8	1.23	31	1995-96
Grade 8 BSAP - Reading (Below standards)	241	47.3	28.8	1.64	41	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	153	36.4	29.5	1.23	30	1995-96
Exit Exam (Not passing all parts on 1st attempt)	213	47.3	35.3	1.34	36	1995-96
Dropout Rate	778	32.4	27.3	1.19	35	1992-95
25-34 Year olds with no HS Degree or GED	1,459	34.1	19.1	1.79	45	1990
Adolescent Risk Behavior						
Not in School or Employed	168	8.5	9.6	0.89	8	1990
Pregnancy (Ages 14 - 17)	76	7.8	4.8	1.63	45	1994
Alcohol Use (High School)	486	29.3	37.4	0.78	2	1992-93
Drug Use (High School)	147	8.9	12.8	0.70	23	1992-93
Binge Drinking (5 or more drinks)	215	13.0	16.3	0.80	14	1992-93
Delinquency (ages 15 - 17)	78	5.3	6.4	0.83	16	1994-95

* 1 = "best" 46 = "worst"

DILLON TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	58	10.4	1.58	1992	65	13.1	1.98	1993	73	14.1	1.93	1994
Births to Mothers Not Completing High School	190	34.0	1.44	1992	179	36.1	1.61	1993	182	35.2	1.61	1994
Births to Single Mothers	279	49.9	1.65	1992	245	49.4	1.63	1993	267	51.6	1.70	1994
Children in Single-Parent Families		18.9	1.30	1970		24.3	1.29	1980	2,614	35.3	1.41	1990
Economic Status												
Poor Children		48.4	1.69	1969		37.6	1.77	1979	3,435	37.3	1.78	1989
Mean Income of Families with Children					25,159	N/A	1.31	1979	27,055	N/A	1.31	1989
Health												
Less than Adequate Prenatal Care	325	58.1	1.47	1992	255	51.4	1.46	1993	251	48.5	1.52	1994
Low Birth Weight	48	8.6	0.96	1992	61	12.3	1.32	1993	53	10.3	1.12	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	217	37.0	1.39	1990-91	214	37.6	1.35	1992-93	148	27.5	0.98	1994-95
1st Grade Failures	107	18.2	2.02	1991-92	90	16.7	1.72	1992-93	49	9.2	1.35	1994-95
Failures Grades 1-3 (approx. %)	140	24.6	1.74	1991-92	136	26.7	1.87	1992-93	71	13.4	1.19	1994-95
Overage for Grade 3	160	29.7	1.15	1991-92	154	30.1	1.47	1993-94	94	18.9	1.17	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	104	20.2	1.05	1991-92	132	28.0	1.41	1993-94	169	36.3	1.30	1995-96*
Grade 8 BSAP - Math (Below Standards)	188	34.2	1.27	1991-92	185	35.2	1.14	1993-94	218	42.9	1.23	1995-96
Grade 8 BSAP - Reading (Below Standards)	210	38.3	1.57	1991-92	206	39.5	1.37	1993-94	241	47.3	1.64	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	154	29.2	1.33	1991-92	130	27.0	1.11	1993-94	153	36.4	1.23	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	207	43.5	1.40	1991-92	177	40.0	1.22	1993-94	213	47.3	1.34	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	68	7.0	1.49	1992	69	7.2	1.60	1993	76	7.8	1.63	1994
Alcohol Use (High School)	568	36.2	0.90	1989-90					486	29.3	0.78	1992-93
Drug Use (High School)	209	13.3	0.99	1989-90					147	8.9	0.70	1992-93
Binge Drinking (5 or more drinks)		15.8	1.01	1989-90					215	13.0	0.80	1992-93

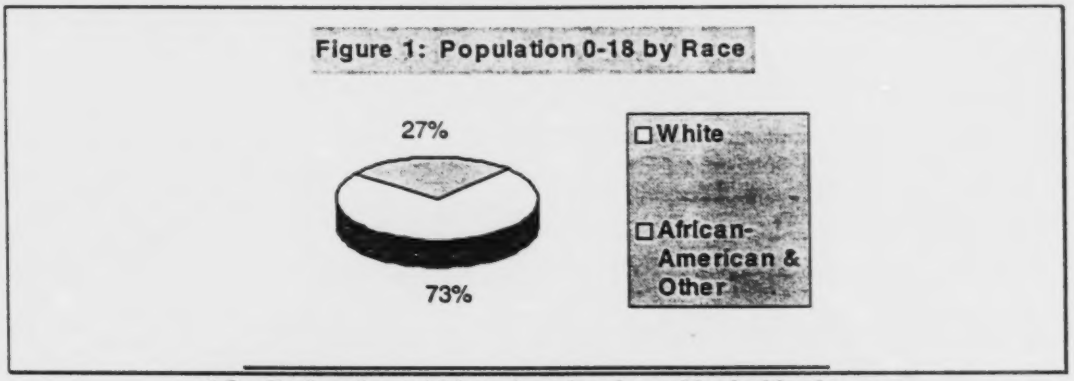
SOUTH CAROLINA kids count

1996 Report DORCHESTER

DEMOGRAPHICS

In 1994, there were 26,290 children under age 18 in the county. Of these, 19,080 were White and 7,210 were African-American and Other races. There were 20,168 children under age 18 in 1980, 13,392 in 1970, and 10,836 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 29.2% of the population in 1994, down from 44.4% in 1960, 41.5% in 1970 and 34.3% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 44.4% of all households in 1990, as compared with 54.0% of households in 1960, had children below the age of 18.

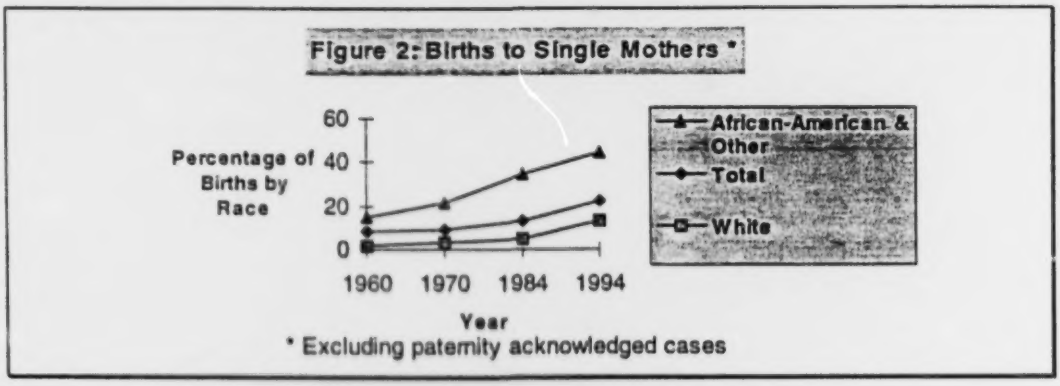
Births to Teen Mothers: In 1994, 55 babies were born to mothers younger than age 18. These babies were 4.3% of all children born in the county; 3.2% of all White babies and 7.0% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 61.8% were born to single mothers.

In 1994, 160 babies were born to mothers younger than age 20. These babies were 12.6% of all children born in the county; 10.9% of all White babies and 16.6% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 56.9% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 179 babies, 14.1% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 40.2% in 1970.

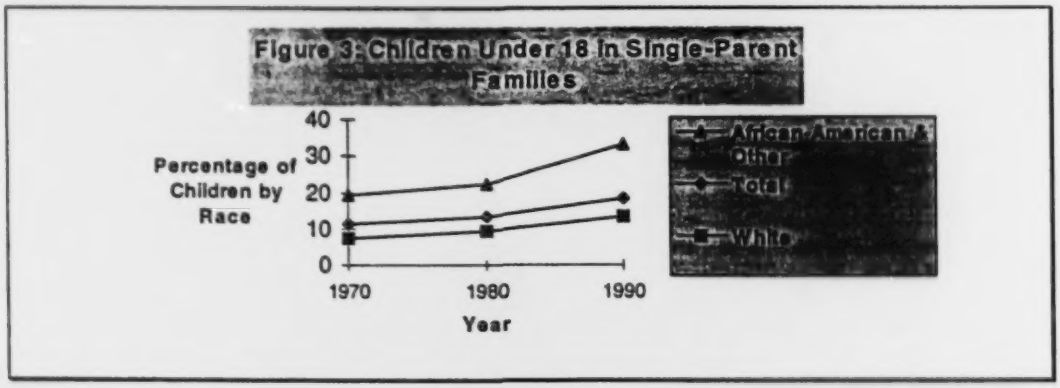
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 284 babies, 22.3% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 13.2% and in 1960 it was 8.1%. In 1994, 13.2% of White children and 44.1% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 91 babies, 7.1% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 375, constituting 29.4% of all babies, 20.1% of White babies, and 51.9% of African-American and Others.



Divorce Rate: In 1994, 391 marriage licenses were issued, while 314 divorce decrees involving 274 children were filed. In 1970 only 51 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 4,096 children lived with only one parent. This was 18.3% of all children, up from 13.2% in 1980 and 11.6% in 1970. In 1990, 13.4% of White children and 33.2% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 59.4% of mothers with children under 6 and 73.4% with children 6 - 17 were in the labor force. This has increased substantially from 19.8% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 959 children investigated as alleged child abuse and neglect victims: 30.4% for physical abuse; 11.9% for sexual abuse, 61.8% for neglect, and 89.9% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 159 children were victims of abuse and neglect: of these 40.3% were male and 59.7% were female; 50.9% were White, and 49.1% were African-American and Other. By age, 39.0% were 0 - 5, 39.0% were 6 - 12, and 22.0% were 13 - 17. They constituted 0.6% of all children age 18 or younger; 0.4% of all Whites and 1.1% of all African-Americans and Others. In the verified cases, 40.9% of abused and neglected children lived in two parent families, 47.2% in single parent families, 8.2% with extended families, and 3.8% in other circumstances.

Family Violence: In 1994, 684 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 33.0% of all assaults, which include both simple and aggravated assaults. Overall, 57.6% of all domestic assaults involve spouse abuse (constituting 19.2% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 3.9% of all children did not live with their natural parents; of these, 619 or 2.5% of children lived with relatives, 320 or 1.3% lived with non-relatives, and 21 were in institutional facilities.

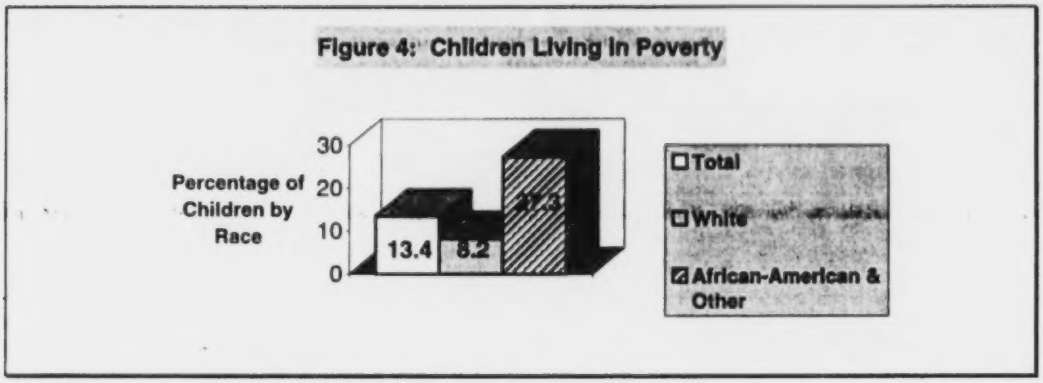
Out of Home Placements: As of September 30, 1996, 81 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 7.4% 0-2, 13.6% 3-5, 21.0% 6-10, 18.5% 11-13, and 39.5% 14 and above. The foster care population is comprised of 43.2% males and 56.8% females. Regarding their future, 9.9% were under a plan for placement in adoptive homes, 70.4% for return to a parent or guardian, 11.1% for placement with a relative, 4.9% for independent living, 3.7% for permanent foster care, and 0.0% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.42 adults for every person below age 18. This was up substantially from 1960, when there were only 1.25 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 3,251 children and youth under the age of 18 lived in families with incomes below poverty. Over 13.4% of all children and youth lived below poverty: 8.2% of Whites and 27.3% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 13.4% in 1989, it was 15.0% in 1979 and 28.6% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 14.6% of children 0 - 5 and 12.7% of children 6 - 17 lived in poverty; 22.6% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 41.9% of children in single-parent families lived in poverty, but only 6.3% of children in married-couple families were poor. Children in single-parent families made up 61.8% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 4,560 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 1,309 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	24,247	3,251	4,560	5,990	7,471	8,037	8,903
Percent		13.4%	18.8%	24.7%	30.8%	33.1%	36.7%
White	17,648	1,451	2,222	2,991	3,972	4,290	4,912
Percent		8.2%	12.6%	16.9%	22.5%	24.3%	27.8%
African-American and Other	6,599	1,800	2,338	2,999	3,499	3,747	3,991
Percent		27.3%	35.4%	45.4%	53.0%	56.8%	60.5%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 6.5% of households did not have a car; 3.3% of Whites and 18.0% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 7.2% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 14.7% of households had no phone.

Income: The mean income of families with children in 1989 was $37,664; in 1979, it had been $35,185, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 1.7%.

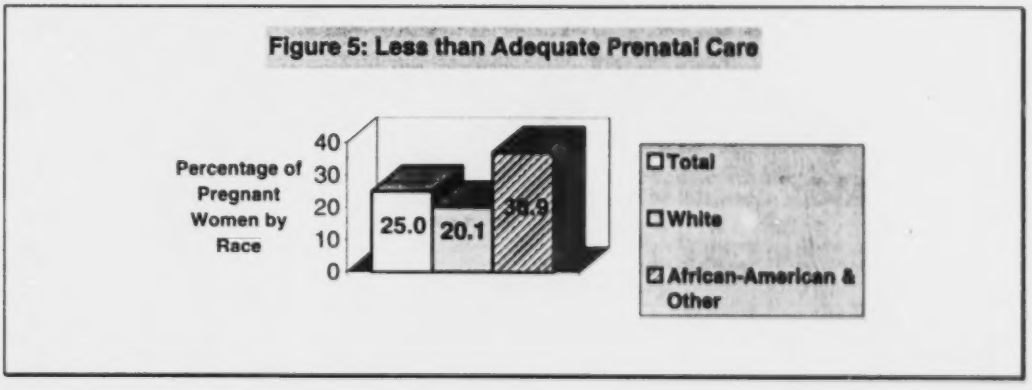
The mean income of single-parent families with children was $17,689 in 1989, as compared with $42,035 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 909 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 35.0% had child support court orders. The average monthly payment of child support was $155.04, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 233 parents in non-AFDC families were obligated to pay a monthly average of $239.74. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 201 or 15.8% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 319 or 25.0% of pregnant women received less than adequate prenatal care: 181 or 20.1% of Whites and 138 or 36.9% of African-Americans and Others. In that same year, 14 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 88 or 6.9% of all babies in the county were born with low birthweight. Over 8.8% of African-American babies and 6.1% of White babies were born with low birthweight. During 1992-94, approximately 54 or 1.3% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 54.4%. For Whites, the rate decreased by 44.4%, while for African-Americans and Others, the rate decreased by 65.9%. Over the three-year period 1992-94, 21 White and 10 African-American and Other infants died before age one. By comparison, 31 White and 26 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 16 White and 4 African-American and Other children ages 1-14 died in the county. During 1982-84, 14 White and 7 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 58.6% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 22.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 885 to 1,328 youth ages 13-19 in the county were infected with a STD. In the county, there were 2 reported cases of children under age 15 and 43 youth ages 15 - 19 infected with gonorrhea; 1 youth ages 15 - 19 was reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 16.4% first smoked by age 11, 35.6% by age 13, and 46.4% by age 15. In a typical month, 12.4% of 7th and 8th graders and 23.6% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 25.1% of White 7th to 12th graders used cigarettes, in comparison with 4.9% African-Americans. A smaller but significant group of high school students (9.7%) used smokeless tobacco monthly; it was used primarily by White males (24.8%) compared with 1.4% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 2,629 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 764 students in grades 1-12 with learning disabilities and 398 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 1,666 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 3,891 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 23 nurses; 19 are currently available.

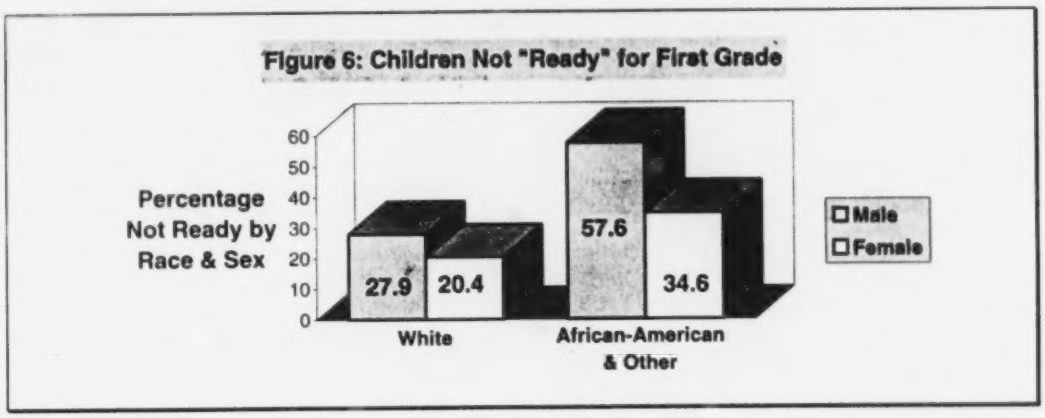
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 24.1% for Whites and 28.7% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

457 children not ready	32.3% children not ready

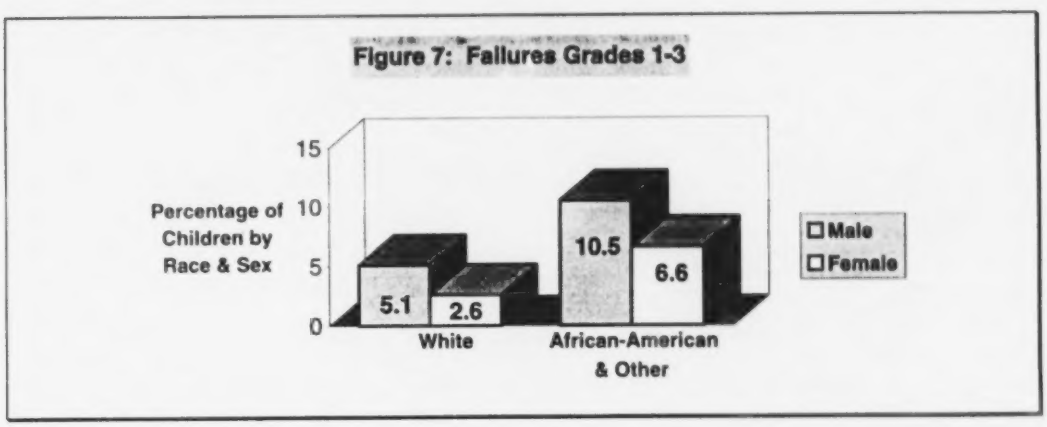


1st Grade Failures in 1995:

55 children failing	3.8% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

78 children failing	5.4% children failing



Overage for Grade 3 in 1996:

124 children overage	9.3% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 328 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 12.4% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 32.3% assessed not ready for the 1st grade, 9.3% overage in grade 3, and 12.4% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

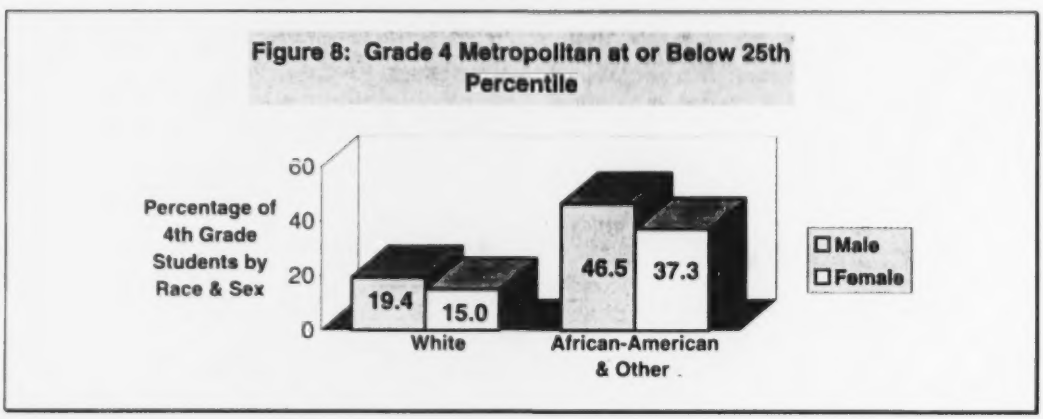
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 398 speech and language impaired, 764 learning disabled, 90 emotionally disabled, 344 mentally impaired, and 59 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 10.3% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

344 children at or below 25th percentile	25.4% children at or below 25th percentile



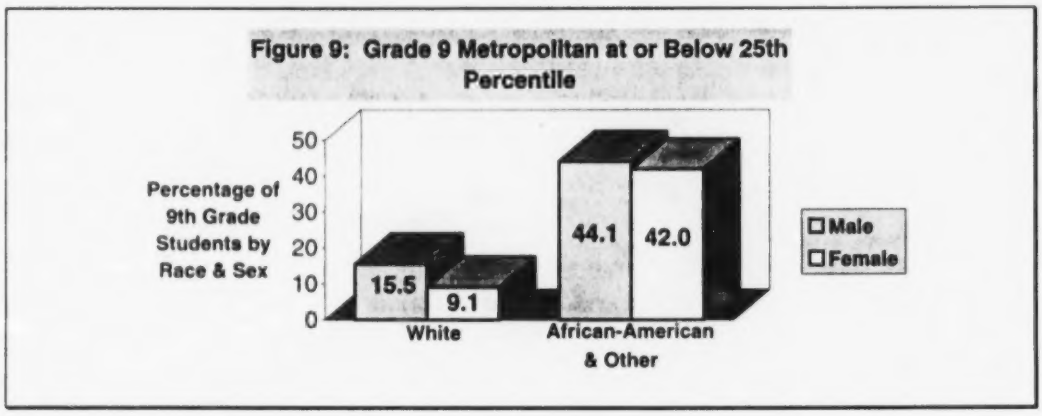
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	442	31.3	335	23.9
White Males	91	19.7	97	21.1
White Females	106	22.3	69	14.6
African-American & Other Males	129	53.3	100	41.8
African-American & Other Females	115	50.2	69	30.3

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

283 students at or below 25th percentile

22.7% students at or below 25th percentile

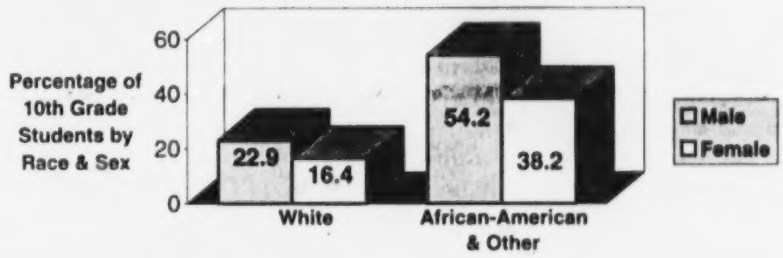


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

322 students not passing all parts

27.9% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam

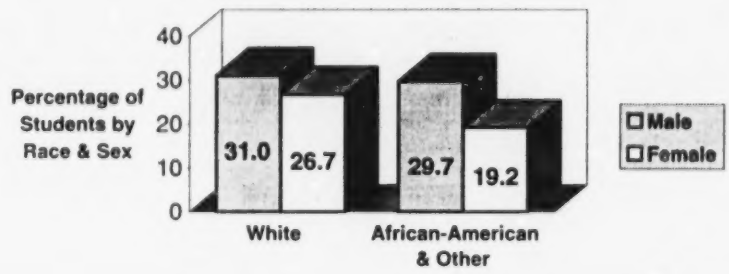


Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 52.8% to 21.3% in math and from 42.6% to 19.7% in reading. During the 1990s the trend altered, with 31.3% not meeting 8th grade math standards in 1996 and 23.9% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 17.7% in 1983 on the CTBS, 24.8% in 1990 on the Stanford, and 26.4% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 25.6% in 1990 and 19.1% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

1,328 students drop out	27.6% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 24.9% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 27.2% during 1985-89, and 29.8% during 1990-94. During the 1995-96 period, 95.4% of all who did graduate received the State High School Diploma, while 2.0% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 2.6% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 109 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 150 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 15.1% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 22.7% to 31.3%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 495 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 10.6% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

8.5%	White Males	15.0%	African-American & Other Males
10.3%	White Females	12.1%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 85 girls between the ages of 14 and 17 became pregnant in 1993 and 89 in 1994. In 1994, this represented 3.6% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 2.8% for Whites and 5.1% for African-Americans and others. Of all pregnancies to 14-17 year olds, 60.7% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 14.3%.

Alcohol Use: In 1992-93, 18.4% of 7th and 8th graders and 41.2% of high schoolers said they had used alcohol in the past month. Of White males, 36.6% had used it in the past month, compared with 30.2% of African-American males; likewise, 33.8% of White females said they had used alcohol, compared with 18.5% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 18.1% had used alcohol by age 11 or younger, 41.6% by age 13, and 62.9% by age 15.

During the previous year, 30.4% of 7th and 8th graders and 42.1% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 29.0% said they had driven after drinking, and 9.4% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 63.5% of eighth graders and 92.0% of seniors felt that beer was easy to get; 56.1% of eighth graders and 50.8% of seniors felt there was not a great risk in using it regularly.

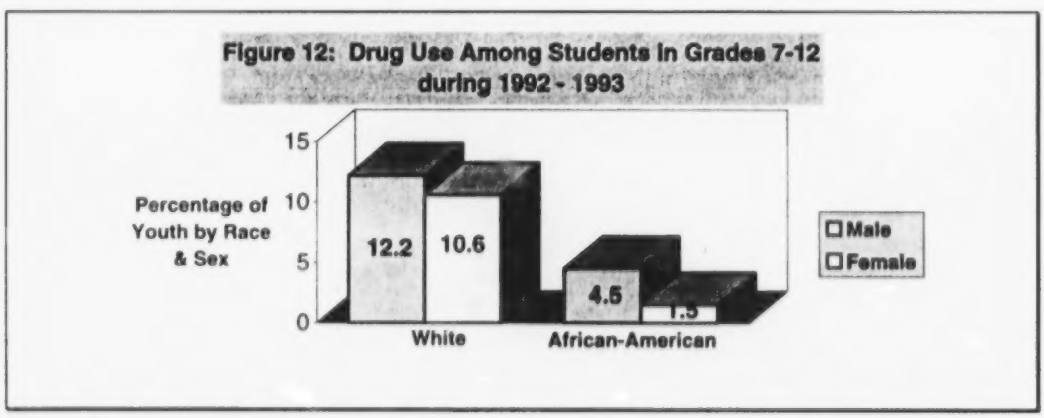
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 32.3% of all high school students in 1992-93 responded 3 or more drinks at a time; 19.2% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 4.4% of 7th and 8th graders and 11.8% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (12.2%) and White females (10.6%); use among African-American males was 4.5%; African-American females, 1.5%. Some young people first used drugs at an early age: among students 15 and older, 3.2% experienced their first use by age 11 or sooner; 9.9% had used a drug by age 13, and 18.2% by age 15.

Of seniors who had initiated use of marijuana, 8.9% had started use at home, 43.5% at a friend's home, and 47.7% elsewhere. During the past year, 4.2% of all high school students said that they used marijuana at home, 10.3% at a friend's house, and 6.5% in a car. In the past year, 6.8% of all high school students who drive and 8.4% of seniors who drive said that they had driven after using drugs . Furthermore, 5.3% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 30.2% of 8th graders who had an opinion said it is easy to get marijuana and 22.6% said it is easy to get cocaine or crack; 78.6% of seniors who had an opinion said it is easy to get marijuana and 62.1% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 19.1% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 330 individual juvenile offenders in the county were referred to the Solicitor; of these, 11.2% were age 12 or younger, 26.7% were 13 or 14, and 62.1% were 15 or older.

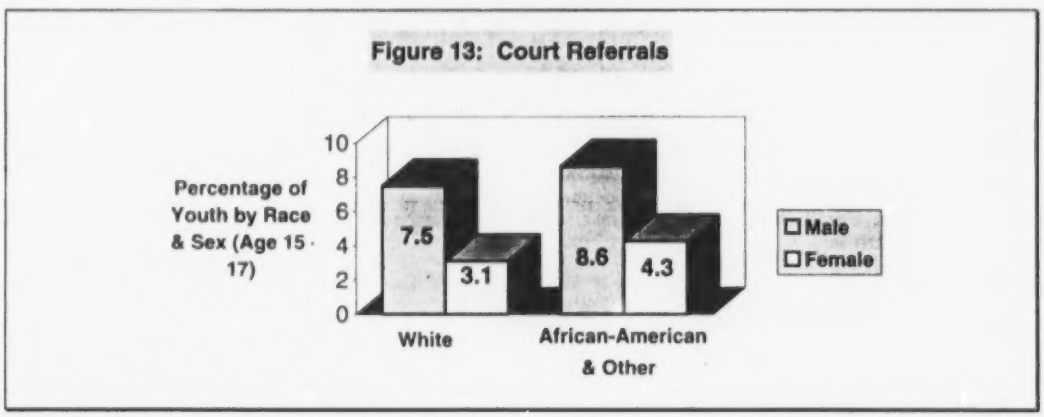
Of the referrals to the family court, 17.3% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 94 juvenile cases constituting 23.9% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 18.9% lived in families with income under $10,000, 36.8% with $10,000-$19,999 and 44.3% with $20,000 or more. Furthermore, only 29.3% of delinquents lived with both natural parents, while 45.9% lived in a single parent household and 24.8% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 29.5% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 32.1% had at least one prior referral and 12.4% had been referred to court 3 times or more.

In 1994-95, there were 29 juvenile commitments from the county to State institutions.

During 1994-95, 205 youth ages 15 to 17 were referred to the family courts. In the county, 5.6% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 26 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 14 deaths between 1990 and 1994; homicides killed 5 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 18.3% of children in single-parent families, 13.4% in poverty, 27.6% dropping out of school, 41.2% of high school students using alcohol and 19.1% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

Dr. A. Baron Holmes (803-734-2291) E-mail bholmes@ogc.state.sc.us

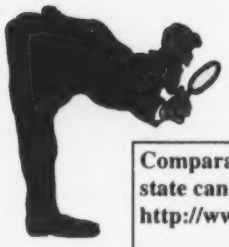
-or-

SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.



Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

DORCHESTER

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	55	4.3	7.3	0.59	2	1994
Births to Mothers Not Completing High School	179	14.1	21.8	0.65	1	1994
Births to Single Mothers	284	22.3	30.4	0.73	7	1994
Children in Single-Parent Families	4,096	18.3	25.1	0.73	4	1990
Parents Working	7,029	67.9	74.3	0.91	4	1990
Abuse & Neglect Victims	159	0.6	1.0	0.60	7	1995-96
Separation from Parents	960	3.9	5.1	0.76	7	1990
Economic Status						
Poor Children	3,251	13.4	21.0	0.64	3	1989
Mean Income of Families with Children	$37,664	NA	NA	1.06	7	1989
Health						
Less than Adequate Prenatal Care	319	25.0	32.0	0.78	5	1994
Low Birth Weight	88	6.9	9.2	0.75	3	1994
Not Adequately Immunized	332	22.0	18.0	1.22	41	1995
Cigarette Smokers (High School)	867	23.6	23.1	1.02	30	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	457	32.3	28.1	1.15	34	1994-95
1st Grade Failures	55	3.8	6.8	0.56	7	1994-95
Failures grades 1-3 (approx. %)	78	5.4	11.3	0.48	4	1994-95
Overage for Grade 3	124	9.3	16.2	0.57	5	1995-96
Special Education (ages 8 and 9)	328	12.4	15.3	0.81	9	1995-96
School Achievement						
Special Education Grades 1 - 12	1,655	10.3	13.0	0.79	4	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	344	25.4	27.9	0.91	14	1995-96
Grade 8 BSAP - Math (Below standards)	442	31.3	34.8	0.90	13	1995-96
Grade 8 BSAP - Reading (Below standards)	335	23.9	28.8	0.83	9	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	283	22.7	29.5	0.77	5	1995-96
Exit Exam (Not passing all parts on 1st attempt)	322	27.9	35.3	0.79	4	1995-96
Dropout Rate	1,328	27.6	27.3	1.01	24	1992-95
25-34 Year olds with no HS Degree or GED	2,492	15.1	19.1	0.79	6	1990
Adolescent Risk Behavior						
Not in School or Employed	495	10.6	9.6	1.10	23	1990
Pregnancy (Ages 14 - 17)	89	3.6	4.8	0.75	3	1994
Alcohol Use (High School)	1,513	41.2	37.4	1.10	42	1992-93
Drug Use (High School)	433	11.8	12.8	0.92	29	1992-93
Binge Drinking (5 or more drinks)	705	19.2	16.3	1.18	41	1992-93
Delinquency (ages 15 - 17)	205	5.6	6.4	0.88	19	1994-95

* 1 = "best" 46 = "worst"

DORCHESTER TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	51	3.4	0.52	1992	57	4.0	0.61	1993	55	4.3	0.59	1994
Births to Mothers Not Completing High School	254	17.0	0.72	1992	249	17.3	0.77	1993	179	14.1	0.65	1994
Births to Single Mothers	294	19.7	0.65	1992	279	19.4	0.64	1993	284	22.3	0.73	1994
Children in Single-Parent Families		11.6	0.80	1970		13.2	0.70	1980	4,096	18.3	0.73	1990
Economic Status												
Poor Children		28.6	1.00	1969		15.0	0.71	1979	3,251	13.4	0.64	1989
Mean Income of Families with Children					35,185	N/A	0.94	1979	37,664	N/A	0.94	1989
Health												
Less than Adequate Prenatal Care	373	25.0	0.63	1992	277	19.2	0.54	1993	319	25.0	0.78	1994
Low Birth Weight	95	6.4	0.71	1992	110	7.6	0.82	1993	88	6.9	0.75	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	372	25.1	0.94	1990-91	357	24.9	0.90	1992-93	457	32.3	1.15	1994-95
1st Grade Failures	84	5.7	0.63	1991-92	41	3.3	0.34	1992-93	55	3.8	0.56	1994-95
Failures Grades 1-3 (approx. %)	125	8.5	0.60	1991-92	58	4.7	0.33	1992-93	78	5.4	0.48	1994-95
Overage for Grade 3	298	21.2	0.82	1991-92	200	13.9	0.68	1993-94	124	9.3	0.57	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	247	17.5	0.91	1991-92	284	19.3	0.97	1993-94	344	25.4	0.91	1995-96*
Grade 8 BSAP - Math (Below Standards)	278	23.2	0.86	1991-92	332	24.8	0.80	1993-94	442	31.3	0.90	1995-96
Grade 8 BSAP - Reading (Below Standards)	199	16.7	0.68	1991-92	294	21.9	0.76	1993-94	335	23.9	0.83	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	228	19.5	0.89	1991-92	218	17.1	0.70	1993-94	283	22.7	0.77	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	244	27.8	0.89	1991-92	277	27.5	0.84	1993-94	322	27.9	0.79	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	92	3.7	0.79	1992	85	3.4	0.76	1993	89	3.6	0.75	1994
Alcohol Use (High School)	1,607	46.2	1.15	1989-90					1,513	41.2	1.10	1992-93
Drug Use (High School)	457	13.1	0.98	1989-90					433	11.8	0.92	1992-93
Binge Drinking (5 or more drinks)		18.5	1.19	1989-90					705	19.2	1.18	1992-93

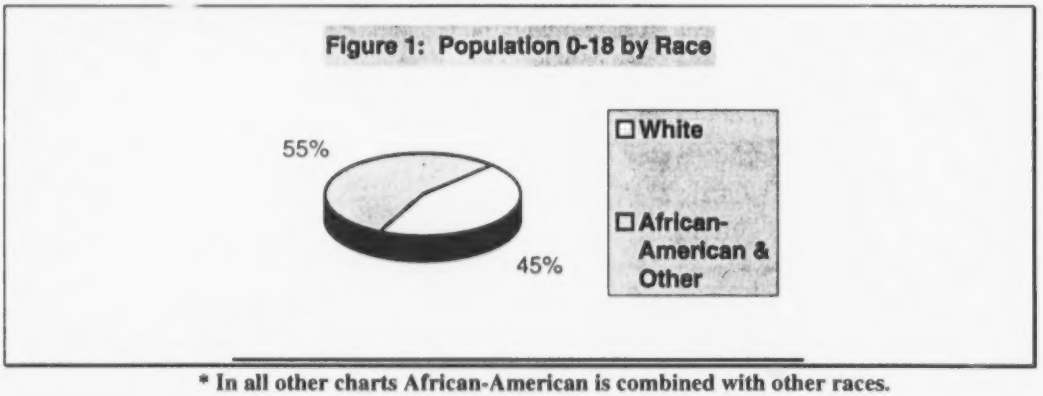
SOUTH CAROLINA kids count

1996 Report EDGEFIELD

DEMOGRAPHICS

In 1994, there were 5,450 children under age 18 in the county. Of these, 2,430 were White and 3,020 were African-American and Other races. There were 5,681 children under age 18 in 1980, 6,328 in 1970, and 7,177 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 28.4% of the population in 1994, down from 45.6% in 1960, 40.3% in 1970 and 32.4% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 37.7% of all households in 1990, as compared with 48.0% of households in 1960, had children below the age of 18.

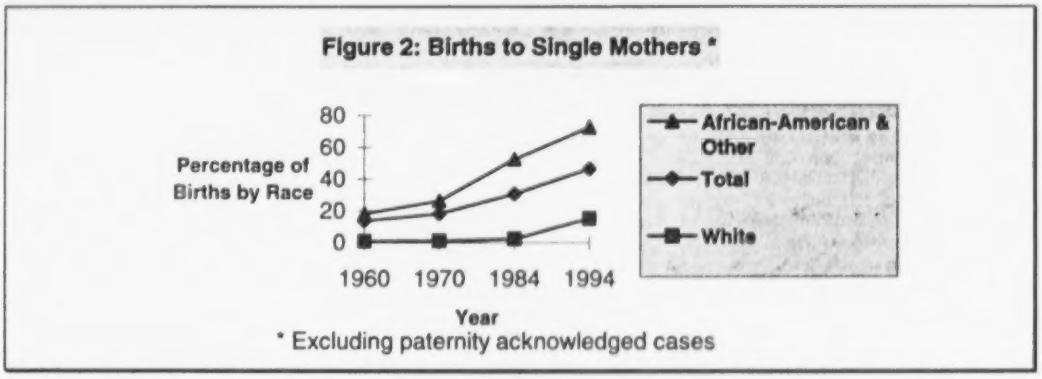
Births to Teen Mothers: In 1994, 26 babies were born to mothers younger than age 18. These babies were 10.7% of all children born in the county; 3.6% of all White babies and 16.8% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 100.0% were born to single mothers.

In 1994, 60 babies were born to mothers younger than age 20. These babies were 24.8% of all children born in the county; 14.4% of all White babies and 33.6% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 90.0% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 65 babies, 26.9% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 60.0% in 1970.

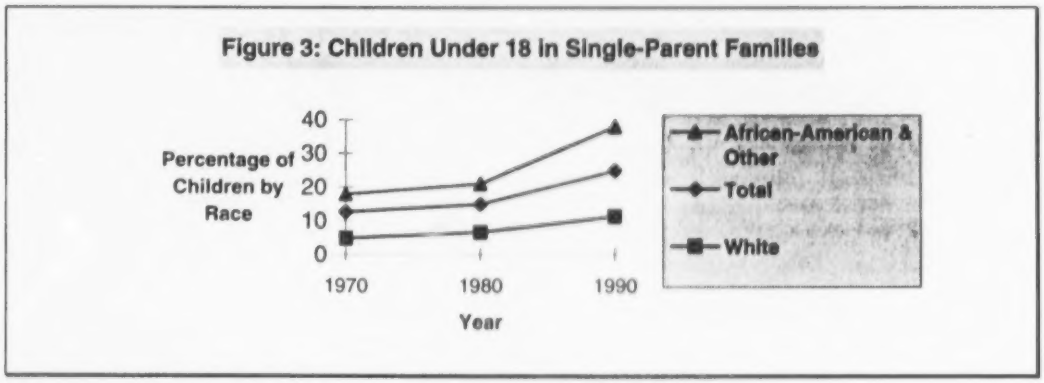
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 112 babies, 46.3% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 30.6% and in 1960 it was 13.6%. In 1994, 15.3% of White children and 72.5% of African-American and Other children were born to single mothers.

To these numbers should be added an additional 1 baby, 0.4% of all born in 1994, whose father formally acknowledged paternity but who had not married the mother. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 113, constituting 46.7% of all babies, 16.2% of White babies, and 72.5% of African-American and Others.



Divorce Rate: In 1994, 142 marriage licenses were issued, while 56 divorce decrees involving 47 children were filed. In 1970 only 14 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 1,141 children lived with only one parent. This was 24.8% of all children, up from 14.9% in 1980 and 12.6% in 1970. In 1990, 11.3% of White children and 37.9% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 70.3% of mothers with children under 6 and 76.4% with children 6 - 17 were in the labor force. This has increased substantially from 34.4% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 187 children investigated as alleged child abuse and neglect victims: 33.2% for physical abuse, 9.1% for sexual abuse, 64.7% for neglect, and 57.2% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 85 children were victims of abuse and neglect: of these 43.5% were male and 56.5% were female; 30.6% were White, and 69.4% were African-American and Other. By age, 34.1% were 0 - 5, 49.4% were 6 - 12, and 16.5% were 13 - 17. They constituted 1.6% of all children age 18 or younger; 1.1% of all Whites and 1.9% of all African-Americans and Others. In the verified cases, 34.1% of abused and neglected children lived in two parent families, 41.2% in single parent families, 7.1% with extended families, and 17.6% in other circumstances.

Family Violence: In 1994, 82 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 29.0% of all assaults, which include both simple and aggravated assaults. Overall, 53.7% of all domestic assaults involve spouse abuse (constituting 15.8% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 5.4% of all children did not live with their natural parents; of these, 253 or 4.7% of children lived with relatives, 34 or 0.6% lived with non-relatives, and 0 were in institutional facilities.

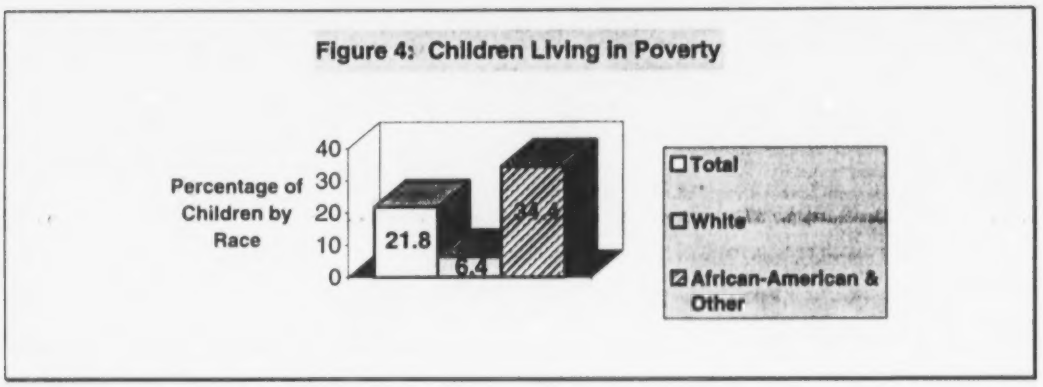
Out of Home Placements: As of September 30, 1996, 32 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 12.5% 0-2, 12.5% 3-5, 12.5% 6-10, 21.9% 11-13, and 40.6% 14 and above. The foster care population is comprised of 43.8% males and 56.3% females. Regarding their future, 6.3% were under a plan for placement in adoptive homes, 40.6% for return to a parent or guardian, 0.0% for placement with a relative, 9.4% for independent living, 21.9% for permanent foster care, and 21.9% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.52 adults for every person below age 18. This was up substantially from 1960, when there were only 1.19 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 1,164 children and youth under the age of 18 lived in families with incomes below poverty. Over 21.8% of all children and youth lived below poverty: 6.4% of Whites and 34.4% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 21.8% in 1989, it was 34.6% in 1979 and 42.5% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 26.4% of children 0 - 5 and 19.6% of children 6 - 17 lived in poverty; 22.4% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 53.0% of children in single-parent families lived in poverty, but only 9.9% of children in married-couple families were poor. Children in single-parent families made up 66.8% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 1,534 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 370 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	5,330	1,164	1,534	1,936	2,419	2,545	2,837
Percent		21.8%	28.8%	36.3%	45.4%	47.7%	53.2%
White	2,389	152	237	382	551	580	700
Percent		6.4%	9.9%	16.0%	23.1%	24.3%	29.3%
African-American and Other	2,941	1,012	1,297	1,554	1,868	1,965	2,137
Percent		34.4%	44.1%	52.8%	63.5%	66.8%	72.7%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 12.5% of households did not have a car; 5.8% of Whites and 22.2% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 13.3% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 35.9% of households had no phone.

Income: The mean income of families with children in 1989 was $34,355; in 1979, it had been $29,515, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 4.8%.

The mean income of single-parent families with children was $14,586 in 1989, as compared with $39,824 in married-couple families with children.

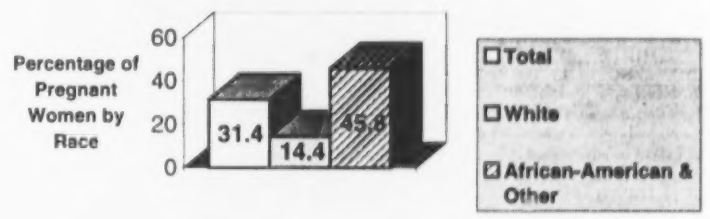
Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 347 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 46.4% had child support court orders. The average monthly payment of child support was $163.31, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 80 parents in non-AFDC families were obligated to pay a monthly average of $217.21. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 53 or 21.9% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 76 or 31.4% of pregnant women received less than adequate prenatal care: 16 or 14.4% of Whites and 60 or 45.8% of African-Americans and Others. In that same year, 6 women received no prenatal care at all.

Figure 5: Less than Adequate Prenatal Care



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 19 or 7.9% of all babies in the county were born with low birthweight. Over 9.2% of African-American babies and 6.3% of White babies were born with low birthweight. During 1992-94, approximately 9 or 1.1% of all babies were born with very low birthweight.

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Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 74.9%. For Whites, the rate decreased by 86.1%, while for African-Americans and Others, the rate decreased by 65.4%. Over the three-year period 1992-94, 1 White and 3 African-American and Other infants died before age one. By comparison, 7 White and 10 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 1 White and 2 African-American and Other children ages 1-14 died in the county. During 1982-84, 2 White and 4 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 44.1% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 12.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 197 to 296 youth ages 13-19 in the county were infected with a STD. In the county, there were no reported cases of children under age 15 and 5 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 10.5% first smoked by age 11, 24.0% by age 13, and 33.8% by age 15. In a typical month, 8.0% of 7th and 8th graders and 17.0% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 25.1% of White 7th to 12th graders used cigarettes, in comparison with 7.5% African-Americans. A smaller but significant group of high school students (10.5%) used smokeless tobacco monthly; it was used primarily by White males (32.2%) compared with 6.2% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 545 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 297 students in grades 1-12 with learning disabilities and 105 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 359 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 807 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 5 nurses; 8 are currently available.

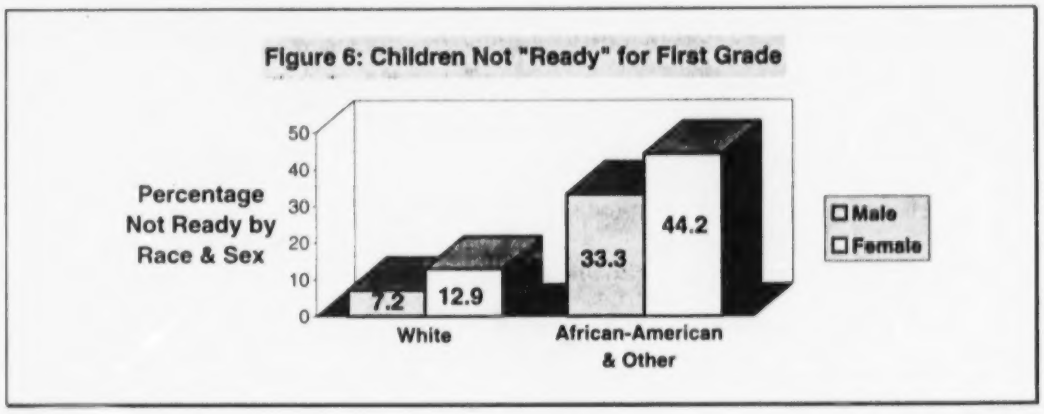
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 17.6% for Whites and 55.7% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

100 children not ready	25.8% children not ready

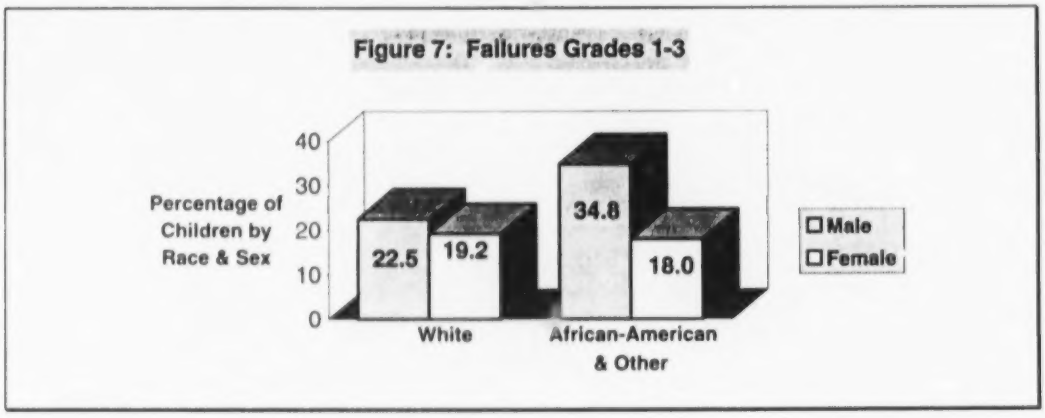


1st Grade Failures in 1995:

52 children failing	13.1% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

90 children failing	24.2% children failing



Overage for Grade 3 in 1996:

101 children overage	30.0% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 87 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 12.8% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 25.8% assessed not ready for the 1st grade, 30.0% overage in grade 3, and 12.8% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

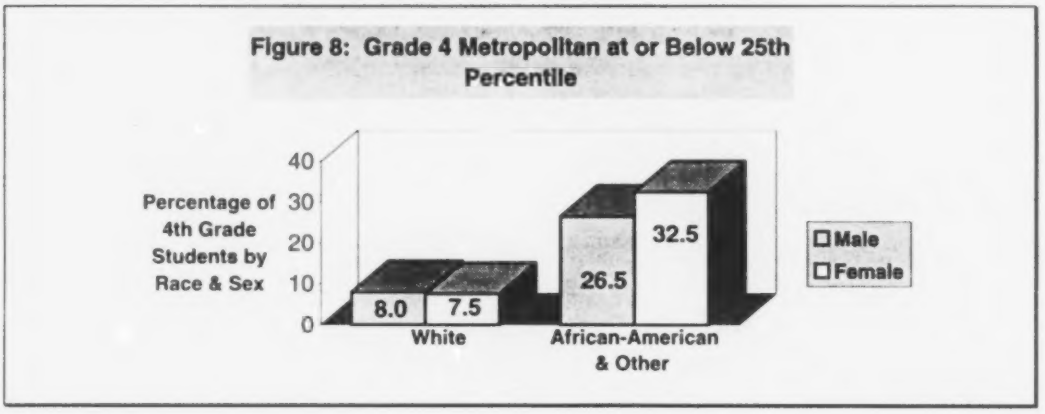
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 105 speech and language impaired, 297 learning disabled, 14 emotionally disabled, 102 mentally impaired, and 6 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 14.2% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

54 children at or below 25th percentile	19.6% children at or below 25th percentile



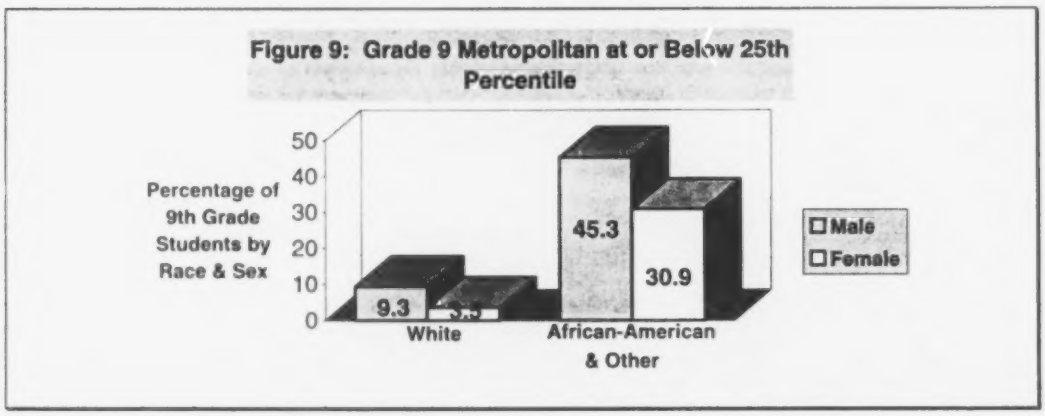
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	154	48.9	91	29.0
White Males	19	22.4	16	19.0
White Females	20	28.6	5	7.1
African-American & Other Males	54	65.9	37	45.1
African-American & Other Females	61	78.2	33	42.3

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

65 students at or below 25th percentile

24.9% students at or below 25th percentile

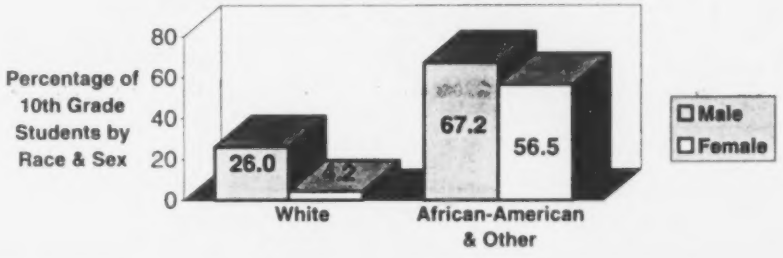


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

108 students not passing all parts

43.0% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



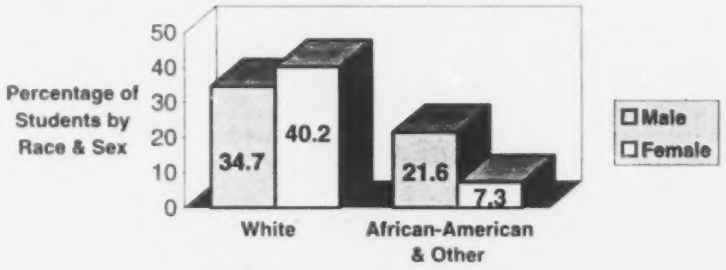
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 53.1% to 31.5% in math and from 55.5% to 25.0% in reading. During the 1990s the trend altered, with 48.9% not meeting 8th grade math standards in 1996 and 29.0% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 26.6% in 1983 on the CTBS, 37.5% in 1990 on the Stanford, and 29.9% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 29.7% in 1990 and 32.5% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

267 students drop out

24.8% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 29.2% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 26.4% during 1985-89, and 28.2% during 1990-94. During the 1995-96 period, 95.2% of all who did graduate received the State High School Diploma, while 2.9% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 1.9% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 10 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 26 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 26.1% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 19.6% to 48.9%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 57 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 5.3% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

0.0%	White Males	9.2%	African-American & Other Males
8.4%	White Females	3.8%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 24 girls between the ages of 14 and 17 became pregnant in 1993 and 28 in 1994. In 1994, this represented 5.1% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 2.6% for Whites and 7.1% for African-Americans and others. Of all pregnancies to 14-17 year olds, 89.3% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it increased by 1.8%.

Alcohol Use: In 1992-93, 18.1% of 7th and 8th graders and 38.3% of high schoolers said they had used alcohol in the past month. Of White males, 32.0% had used it in the past month, compared with 39.6% of African-American males; likewise, 28.2% of White females said they had used alcohol, compared with 21.5% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 12.5% had used alcohol by age 11 or younger, 31.2% by age 13, and 53.0% by age 15.

During the previous year, 37.1% of 7th and 8th graders and 45.6% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 34.6% said they had driven after drinking, and 11.8% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 59.3% of eighth graders and 85.8% of seniors felt that beer was easy to get; 54.5% of eighth graders and 50.0% of seniors felt there was not a great risk in using it regularly.

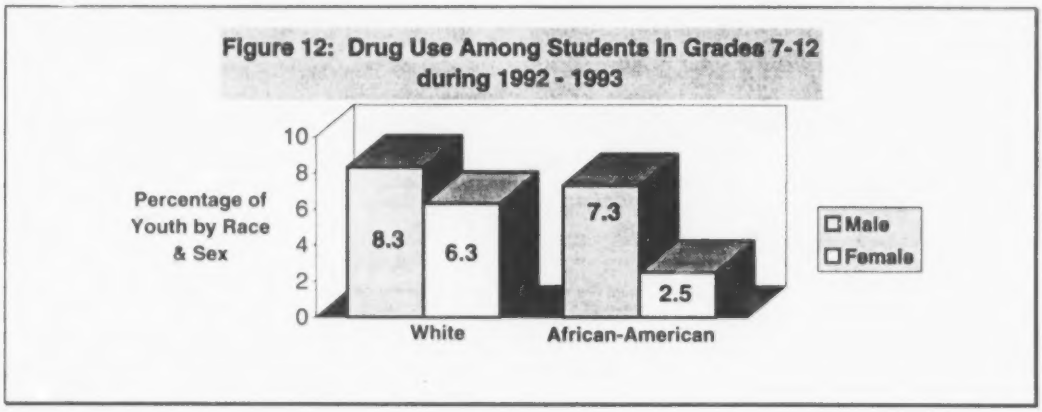
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 25.8% of all high school students in 1992-93 responded 3 or more drinks at a time; 12.6% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 2.9% of 7th and 8th graders and 7.5% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (8.3%) and White females (6.3%); use among African-American males was 7.3%; African-American females, 2.5%. Some young people first used drugs at an early age: among students 15 and older, 1.8% experienced their first use by age 11 or sooner; 3.9% had used a drug by age 13, and 8.6% by age 15.

Of seniors who had initiated use of marijuana, 9.3% had started use at home, 34.6% at a friend's home, and 56.0% elsewhere. During the past year, 1.8% of all high school students said that they used marijuana at home, 4.2% at a friend's house, and 3.6% in a car. In the past year, 3.6% of all high school students who drive and 5.9% of seniors who drive said that they had driven after using drugs . Furthermore, 4.5% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 19.0% of 8th graders who had an opinion said it is easy to get marijuana and 16.3% said it is easy to get cocaine or crack; 56.4% of seniors who had an opinion said it is easy to get marijuana and 50.0% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 12.2% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 63 individual juvenile offenders in the county were referred to the Solicitor; of these, 9.5% were age 12 or younger, 15.9% were 13 or 14, and 74.6% were 15 or older.

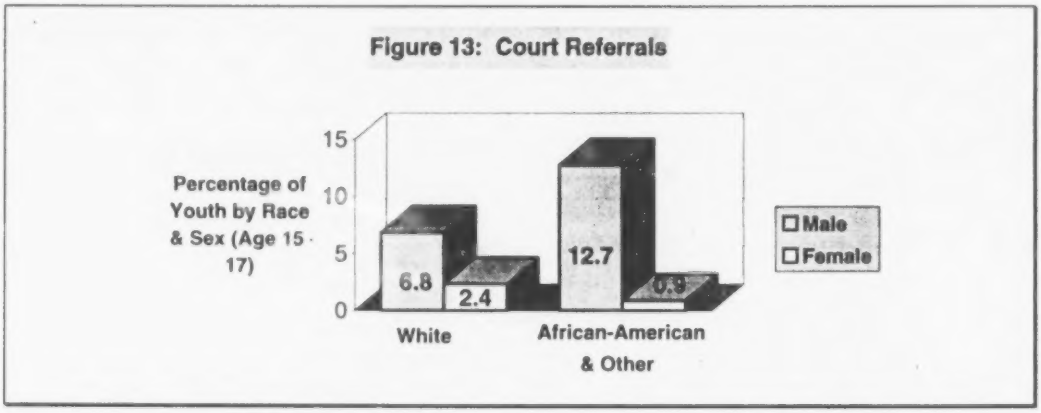
Of the referrals to the family court, 26.8% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 3 juvenile cases constituting 4.2% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 36.4% lived in families with income under $10,000, 23.6% with $10,000-$19,999 and 40.0% with $20,000 or more. Furthermore, only 26.3% of delinquents lived with both natural parents, while 43.9% lived in a single parent household and 29.8% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 44.6% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 15.9% had at least one prior referral and 7.9% had been referred to court 3 times or more.

In 1994-95, there were 5 juvenile commitments from the county to State institutions.

During 1994-95, 47 youth ages 15 to 17 were referred to the family courts. In the county, 5.8% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 5 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 2 deaths between 1990 and 1994; homicides killed 0 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 24.8% of children in single-parent families, 21.8% in poverty, 24.8% dropping out of school, 38.3% of high school students using alcohol and 12.2% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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-or-
SC Kids Count
SC Budget and Control Board
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P O Box 12444
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Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

EDGEFIELD

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	26	10.7	7.3	1.47	37	1994
Births to Mothers Not Completing High School	65	26.9	21.8	1.23	31	1994
Births to Single Mothers	112	46.3	30.4	1.52	39	1994
Children in Single-Parent Families	1,141	24.8	25.1	0.99	16	1990
Parents Working	1,487	74.5	74.3	1.00	22	1990
Abuse & Neglect Victims	85	1.6	1.0	1.60	40	1995-96
Separation from Parents	287	5.4	5.1	1.06	18	1990
Economic Status						
Poor Children	1,164	21.8	21.0	1.04	19	1989
Mean Income of Families with Children	$34,355	NA	NA	0.97	16	1989
Health						
Less than Adequate Prenatal Care	76	31.4	32.0	0.98	20	1994
Low Birth Weight	19	7.9	9.2	0.86	8	1994
Not Adequately Immunized	37	12.0	18.0	0.67	21	1995
Cigarette Smokers (High School)	140	17.0	23.1	0.74	13	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	100	25.8	28.1	0.92	15	1994-95
1st Grade Failures	52	13.1	6.8	1.93	39	1994-95
Failures grades 1-3 (approx. %)	90	24.2	11.3	2.14	39	1994-95
Overage for Grade 3	101	30.0	16.2	1.85	46	1995-96
Special Education (ages 8 and 9)	87	12.8	15.3	0.84	12	1995-96
School Achievement						
Special Education Grades 1 - 12	524	14.2	13.0	1.09	30	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	54	19.6	27.9	0.70	3	1995-96
Grade 8 BSAP - Math (Below standards)	154	48.9	34.8	1.41	40	1995-96
Grade 8 BSAP - Reading (Below standards)	91	29.0	28.8	1.01	17	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	65	24.9	29.5	0.84	10	1995-96
Exit Exam (Not passing all parts on 1st attempt)	108	43.0	35.3	1.22	27	1995-96
Dropout Rate	267	24.8	27.3	0.91	16	1992-95
25-34 Year olds with no HS Degree or GED	775	26.1	19.1	1.37	34	1990
Adolescent Risk Behavior						
Not in School or Employed	57	5.3	9.6	0.55	2	1990
Pregnancy (Ages 14 - 17)	28	5.1	4.8	1.06	22	1994
Alcohol Use (High School)	315	38.3	37.4	1.02	31	1992-93
Drug Use (High School)	62	7.5	12.8	0.59	14	1992-93
Binge Drinking (5 or more drinks)	104	12.6	16.3	0.77	11	1992-93
Delinquency (ages 15 - 17)	47	5.8	6.4	0.91	21	1994-95

* 1 = "best" 46 = "worst"

EDGEFIELD TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	19	6.4	0.97	1992	22	7.9	1.20	1993	26	10.7	1.47	1994
Births to Mothers Not Completing High School	80	26.9	1.14	1992	74	26.6	1.19	1993	65	26.9	1.23	1994
Births to Single Mothers	100	33.7	1.11	1992	116	41.7	1.38	1993	112	46.3	1.52	1994
Children in Single-Parent Families		12.6	0.87	1970		14.9	0.79	1980	1,141	24.8	0.99	1990
Economic Status												
Poor Children		42.5	1.48	1969		34.6	1.63	1979	1,164	21.8	1.04	1989
Mean Income of Families with Children					29,515	N/A	1.12	1979	34,355	N/A	1.04	1989
Health												
Less than Adequate Prenatal Care	109	36.7	0.93	1992	104	37.4	1.06	1993	76	31.4	0.98	1994
Low Birth Weight	32	10.8	1.20	1992	19	6.8	0.73	1993	19	7.9	0.86	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	119	31.9	1.20	1990-91	139	34.8	1.25	1992-93	100	25.8	0.92	1994-95
1st Grade Failures	36	9.9	1.10	1991-92	50	15.4	1.59	1992-93	52	13.1	1.93	1994-95
Failures Grades 1-3 (approx. %)	56	16.1	1.14	1991-92	75	23.9	1.67	1992-93	90	24.2	2.14	1994-95
Overage for Grade 3	108	34.1	1.32	1991-92	73	23.7	1.16	1993-94	101	30.0	1.85	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	65	20.4	1.06	1991-92	64	22.7	1.15	1993-94	54	19.6	0.70	1995-96*
Grade 8 BSAP - Math (Below Standards)	72	24.9	0.92	1991-92	119	37.9	1.23	1993-94	154	48.9	1.41	1995-96
Grade 8 BSAP - Reading (Below Standards)	68	23.5	0.96	1991-92	98	31.2	1.08	1993-94	91	29.0	1.01	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	57	20.1	0.92	1991-92	70	25.5	1.05	1993-94	65	24.9	0.84	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	61	30.7	0.99	1991-92	83	38.8	1.19	1993-94	108	43.0	1.22	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	24	4.5	0.96	1992	24	4.4	0.98	1993	28	5.1	1.06	1994
Alcohol Use (High School)	283	35.4	0.88	1989-90					315	38.3	1.02	1992-93
Drug Use (High School)	75	9.4	0.70	1989-90					62	7.5	0.59	1992-93
Binge Drinking (5 or more drinks)		11.2	0.72	1989-90					104	12.6	0.77	1992-93

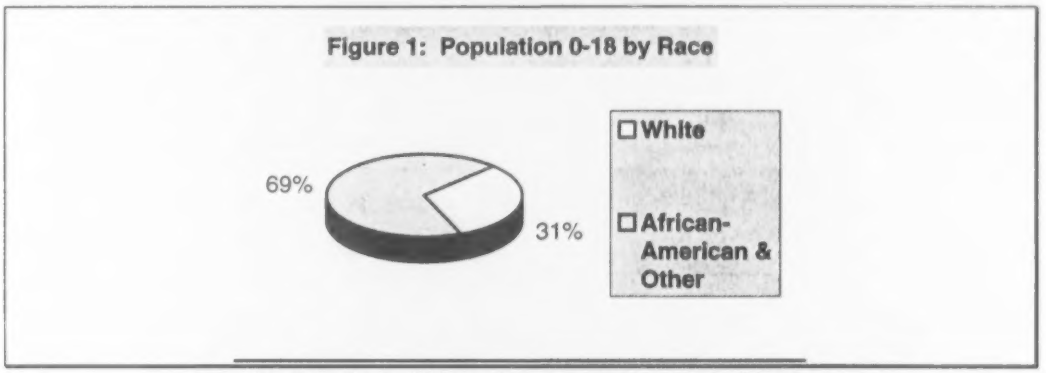
SOUTH CAROLINA kids count

1996 Report FAIRFIELD

DEMOGRAPHICS

In 1994, there were 6,360 children under age 18 in the county. Of these, 2,000 were White and 4,360 were African-American and Other races. There were 6,764 children under age 18 in 1980, 8,172 in 1970, and 9,321 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 28.3% of the population in 1994, down from 45.0% in 1960, 40.9% in 1970 and 32.7% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 36.6% of all households in 1990, as compared with 46.0% of households in 1960, had children below the age of 18.

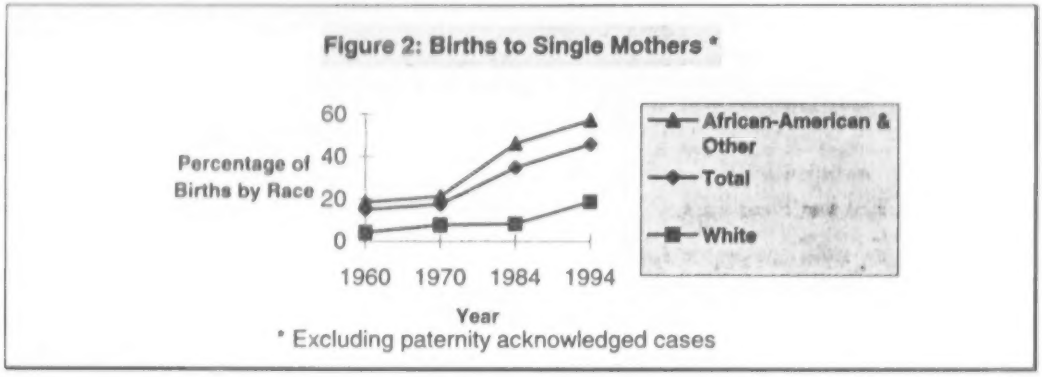
Births to Teen Mothers: In 1994, 32 babies were born to mothers younger than age 18. These babies were 9.6% of all children born in the county; 9.3% of all White babies and 9.7% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 81.3% were born to single mothers.

In 1994, 70 babies were born to mothers younger than age 20. These babies were 21.0% of all children born in the county; 17.5% of all White babies and 22.4% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 84.3% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 65 babies, 19.5% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 56.0% in 1970.

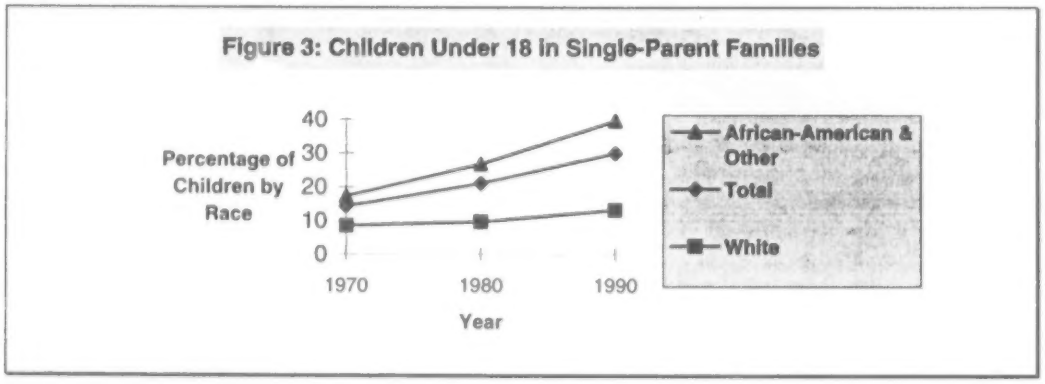
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 153 babies, 45.8% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 34.7% and in 1960 it was 14.9%. In 1994, 18.6% of White children and 57.0% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 23 babies, 6.9% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 176, constituting 52.7% of all babies, 24.7% of White babies, and 64.1% of African-American and Others.



Divorce Rate: In 1994, 179 marriage licenses were issued, while 85 divorce decrees involving 78 children were filed. In 1970 only 23 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 1,546 children lived with only one parent. This was 29.9% of all children, up from 21.0% in 1980 and 14.3% in 1970. In 1990, 13.2% of White children and 39.5% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 74.5% of mothers with children under 6 and 83.0% with children 6 - 17 were in the labor force. This has increased substantially from 36.3% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 131 children investigated as alleged child abuse and neglect victims: 25.2% for physical abuse, 7.6% for sexual abuse, 60.3% for neglect, and 10.7% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 64 children were victims of abuse and neglect: of these 43.8% were male and 56.2% were female; 28.1% were White, and 71.9% were African-American and Other. By age, 40.6% were 0 - 5, 31.3% were 6 - 12, and 28.1% were 13 - 17. They constituted 1.0% of all children age 18 or younger; 0.9% of all Whites and 1.1% of all African-Americans and Others. In the verified cases, 28.1% of abused and neglected children lived in two parent families, 50.0% in single parent families, 1.6% with extended families, and 20.3% in other circumstances.

Family Violence: In 1994, 350 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 31.0% of all assaults, which include both simple and aggravated assaults. Overall, 50.0% of all domestic assaults involve spouse abuse (constituting 15.4% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 5.4% of all children did not live with their natural parents; of these, 275 or 4.3% of children lived with relatives, 70 or 1.1% lived with non-relatives, and 0 were in institutional facilities.

Out of Home Placements: As of September 30, 1996, 32 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 9.4% 0-2, 12.5% 3-5, 21.9% 6-10, 6.3% 11-13, and 50.0% 14 and above. The foster care population is comprised of 56.3% males and 43.8% females. Regarding their future, 28.1% were under a plan for placement in adoptive homes, 18.8% for return to a parent or guardian, 6.3% for placement with a relative, 18.8% for independent living, 28.1% for permanent foster care, and 0.0% for other circumstances.

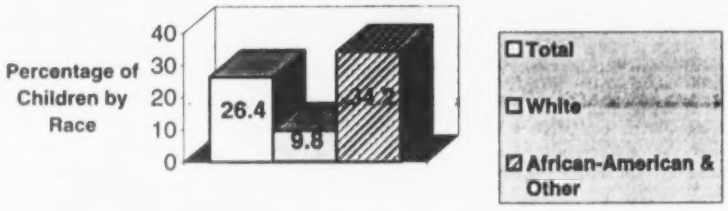
Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.54 adults for every person below age 18. This was up substantially from 1960, when there were only 1.22 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 1,675 children and youth under the age of 18 lived in families with incomes below poverty. Over 26.4% of all children and youth lived below poverty: 9.8% of Whites and 34.2% of African-Americans and others.

Figure 4: Children Living in Poverty



Poverty has always been a serious problem. While the rate among children under age 18 was 26.4% in 1989, it was 26.1% in 1979 and 44.2% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 32.3% of children 0 - 5 and 23.7% of children 6 - 17 lived in poverty; 27.2% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 46.3% of children in single-parent families lived in poverty, but only 15.6% of children in married-couple families were poor. Children in single-parent families made up 61.8% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 2,100 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 425 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	6,350	1,675	2,100	2,558	3,187	3,355	3,710
Percent		26.4%	33.1%	40.3%	50.2%	52.8%	58.4%
White	2,031	200	271	394	505	552	701
Percent		9.8%	13.3%	19.4%	24.9%	27.2%	34.5%
African-American and Other	4,319	1,475	1,829	2,164	2,682	2,803	3,009
Percent		34.2%	42.3%	50.1%	62.1%	64.9%	69.7%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 15.8% of households did not have a car; 6.1% of Whites and 25.2% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 13.8% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 32.0% of households had no phone.

Income: The mean income of families with children in 1989 was $29,109; in 1979, it had been $27,875, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 7.7%.

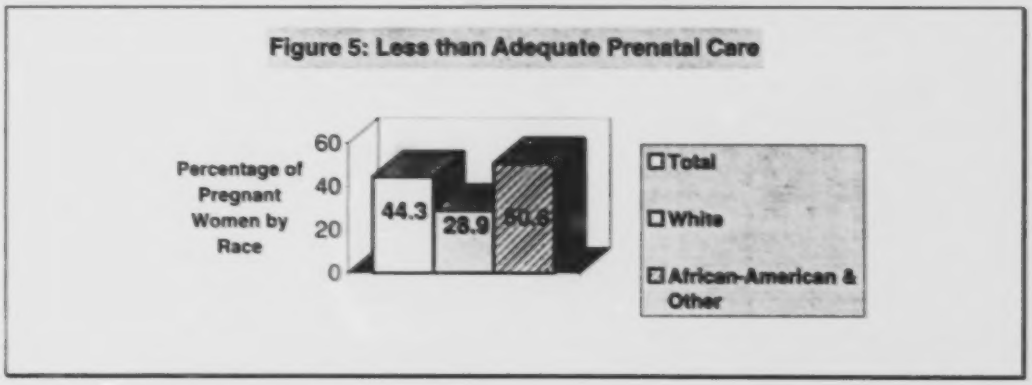
The mean income of single-parent families with children was $17,636 in 1989, as compared with $34,328 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 444 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 46.4% had child support court orders. The average monthly payment of child support was $138.51, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 271 parents in non-AFDC families were obligated to pay a monthly average of $162.03. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 103 or 30.8% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 148 or 44.3% of pregnant women received less than adequate prenatal care: 28 or 28.9% of Whites and 120 or 50.6% of African-Americans and Others. In that same year, 8 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 36 or 10.8% of all babies in the county were born with low birthweight. Over 12.2% of African-American babies and 7.2% of White babies were born with low birthweight. During 1992-94, approximately 21 or 2.0% of all babies were born with very low birthweight.

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Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 54.7%. For Whites, the rate decreased by 100.0%, while for African-Americans and Others, the rate decreased by 38.7%. Over the three-year period 1992-94, 0 White and 8 African-American and Other infants died before age one. By comparison, 4 White and 12 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 4 White and 8 African-American and Other children ages 1-14 died in the county. During 1982-84, 1 White and 8 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 52.7% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 6.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 262 to 393 youth ages 13-19 in the county were infected with a STD. In the county, there were no reported cases of children under age 15 and 29 youth ages 15 - 19 infected with gonorrhea; 1 youth ages 15 - 19 was reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 9.5% first smoked by age 11, 21.0% by age 13, and 31.3% by age 15. In a typical month, 10.5% of 7th and 8th graders and 12.9% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 31.5% of White 7th to 12th graders used cigarettes, in comparison with 6.5% African-Americans. A smaller but significant group of high school students (2.5%) used smokeless tobacco monthly; it was used primarily by White males (14.7%) compared with 1.0% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 636 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 164 students in grades 1-12 with learning disabilities and 253 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 433 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 941 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 5 nurses; 1 are currently available.

Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 31.1% for Whites and 35.8% for African-Americans and Others in 1995.

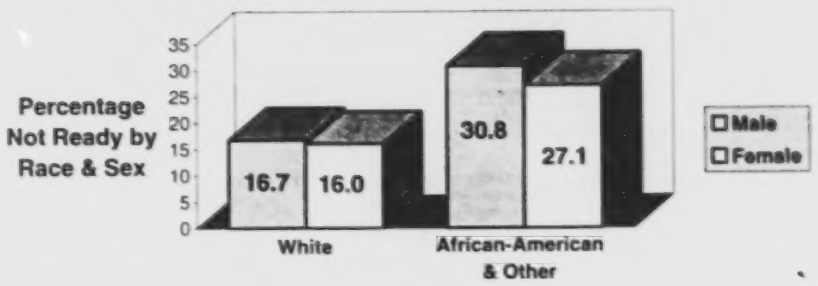
READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

99 children not ready **26.9% children not ready**

Figure 6: Children Not "Ready" for First Grade



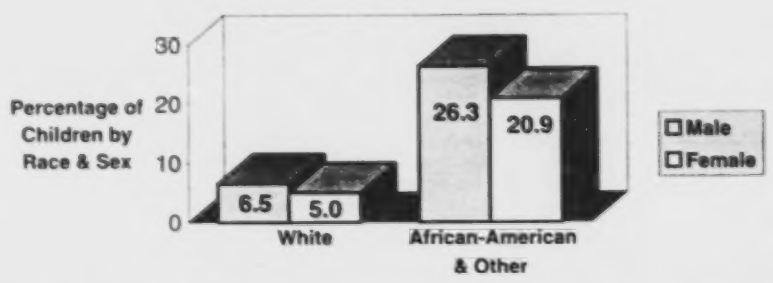
1st Grade Failures in 1995:

41 children failing **12.7% children failing**

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

64 children failing **20.8% children failing**

Figure 7: Failures Grades 1-3



Overage for Grade 3 in 1996:

48 children overage	19.8% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 111 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 20.7% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 26.9% assessed not ready for the 1st grade, 19.8% overage in grade 3, and 20.7% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

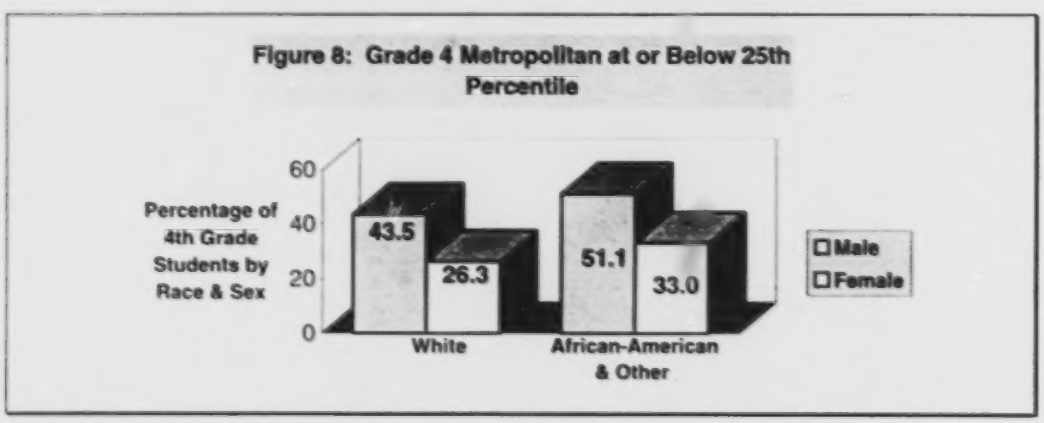
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 253 speech and language impaired, 164 learning disabled, 39 emotionally disabled, 75 mentally impaired, and 36 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 17.3% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

97 children at or below 25th percentile	40.1% children at or below 25th percentile



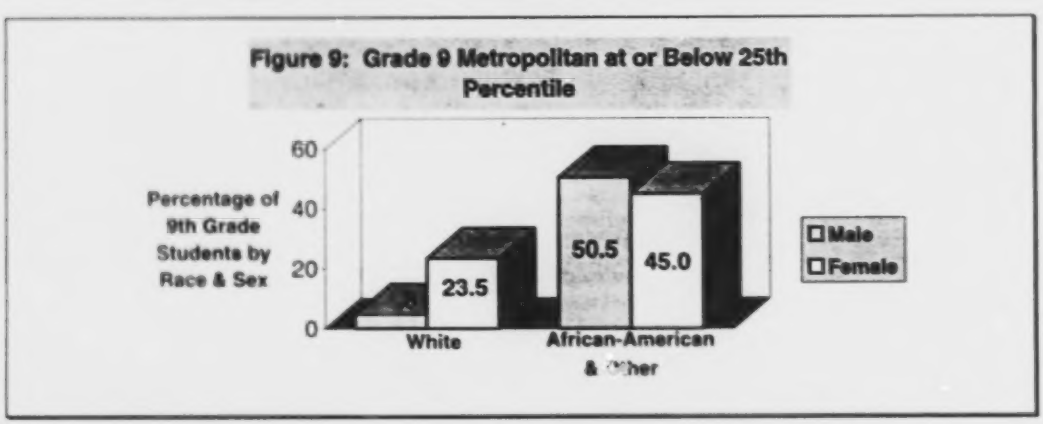
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	158	59.2	142	52.8
White Males	12	37.5	16	50.0
White Females	12	44.4	13	50.0
African-American & Other Males	71	70.3	65	63.7
African-American & Other Females	61	58.1	47	43.5

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

110 students at or below 25th percentile

42.5% students at or below 25th percentile

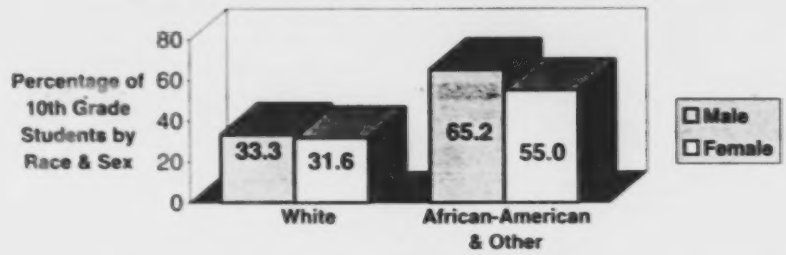


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

126 students not passing all parts

55.5% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



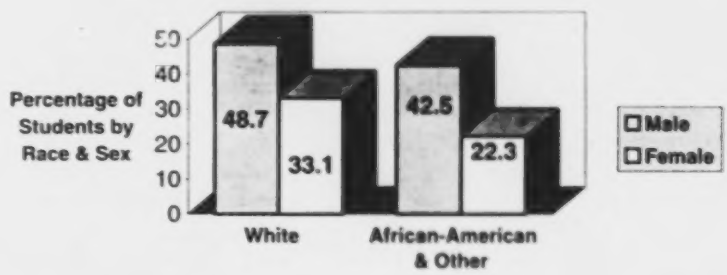
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 77.4% to 27.5% in math and from 77.3% to 36.0% in reading. During the 1990s the trend altered, with 59.2% not meeting 8th grade math standards in 1996 and 52.8% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 47.8% in 1983 on the CTBS, 54.4% in 1990 on the Stanford, and 53.3% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 59.8% in 1990 and 53.7% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

493 students drop out

34.9% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 37.1% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 37.0% during 1985-89, and 33.9% during 1990-94. During the 1995-96 period, 92.0% of all who did graduate received the State High School Diploma, while 6.0% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 2.0% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 18 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 16 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 22.1% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 34.9% to 59.2%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 180 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 11.5% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

7.0%	White Males	11.7%	African-American & Other Males
25.4%	White Females	9.5%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 28 girls between the ages of 14 and 17 became pregnant in 1993 and 47 in 1994. In 1994, this represented 6.4% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 4.5% for Whites and 7.2% for African-Americans and others. Of all pregnancies to 14-17 year olds, 68.1% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it increased by 9.7%.

Alcohol Use: In 1992-93, 21.4% of 7th and 8th graders and 30.6% of high schoolers said they had used alcohol in the past month. Of White males, 30.1% had used it in the past month, compared with 34.5% of African-American males; likewise, 33.8% of White females said they had used alcohol, compared with 17.0% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 15.7% had used alcohol by age 11 or younger, 30.7% by age 13, and 46.7% by age 15.

During the previous year, 38.4% of 7th and 8th graders and 40.3% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 21.1% said they had driven after drinking, and 12.1% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 50.8% of eighth graders and 75.2% of seniors felt that beer was easy to get; 58.5% of eighth graders and 52.7% of seniors felt there was not a great risk in using it regularly.

No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

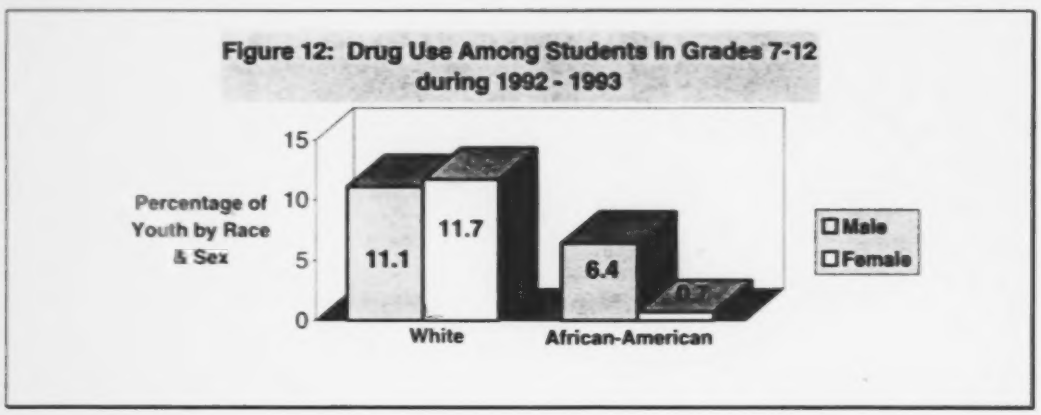
Heavy Drinking: When asked how many drinks, if any, they usually consume, 18.5% of all high school students in 1992-93 responded 3 or more drinks at a time; 9.3% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 3.1% of 7th and 8th graders and 6.5% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (11.1%) and White females (11.7%); use among African-American males was 6.4%; African-American females, 0.7%. Some young people first used drugs at an early age: among students 15 and older, 1.5% experienced their first use by age 11 or sooner; 5.5% had used a drug by age 13, and 9.8% by age 15.

Of seniors who had initiated use of marijuana, 23.0% had started use at home, 34.2% at a friend's home, and 42.9% elsewhere. During the past year, 2.5% of all high school students said that they used marijuana at home, 4.4% at a friend's house, and 3.7% in a car. In the past year, 4.5% of all high school students who drive and 8.4% of seniors who drive said that they had driven after using drugs . Furthermore, 5.8% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 24.7% of 8th graders who had an opinion said it is easy to get marijuana and 24.0% said it is easy to get cocaine or crack; 56.0% of seniors who had an opinion said it is easy to get marijuana and 56.2% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 10.5% rate for county high school students in 1995.

Figure 12: Drug Use Among Students In Grades 7-12 during 1992 - 1993



Juvenile Delinquency: In 1994-95, 112 individual juvenile offenders in the county were referred to the Solicitor; of these, 9.8% were age 12 or younger, 37.5% were 13 or 14, and 52.7% were 15 or older.

Of the referrals to the family court, 23.6% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 33 juvenile cases constituting 22.9% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

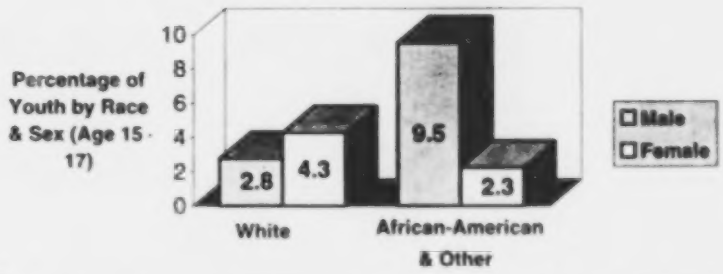
Delinquents are likely to live in families with low income: 58.8% lived in families with income under $10,000, 26.3% with $10,000-$19,999 and 15.0% with $20,000 or more. Furthermore, only 16.3% of delinquents lived with both natural parents, while 48.8% lived in a single parent household and 35.0% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 41.3% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 40.2% had at least one prior referral and 17% had been referred to court 3 times or more.

In 1994-95, there were 10 juvenile commitments from the county to State institutions.

During 1994-95, 59 youth ages 15 to 17 were referred to the family courts. In the county, 5.2% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.

Figure 13: Court Referrals



Deaths: During 1990-94, 15 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 6 deaths between 1990 and 1994; homicides killed 0 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 29.9% of children in single-parent families, 26.4% in poverty, 34.9% dropping out of school, 30.6% of high school students using alcohol and 10.5% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
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Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

FAIRFIELD

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	32	9.6	7.3	1.32	30	1994
Births to Mothers Not Completing High School	65	19.5	21.8	0.89	8	1994
Births to Single Mothers	153	45.8	30.4	1.51	37	1994
Children in Single-Parent Families	1,546	29.9	25.1	1.19	30	1990
Parents Working	1,993	80.5	74.3	1.08	45	1990
Abuse & Neglect Victims	64	1.0	1.0	1.00	22	1995-96
Separation from Parents	345	5.4	5.1	1.06	18	1990
Economic Status						
Poor Children	1,675	26.4	21.0	1.26	27	1989
Mean Income of Families with Children	$29,109	NA	NA	0.82	33	1989
Health						
Less than Adequate Prenatal Care	148	44.3	32.0	1.38	42	1994
Low Birth Weight	36	10.8	9.2	1.17	33	1994
Not Adequately Immunized	25	6.0	18.0	0.33	2	1995
Cigarette Smokers (High School)	120	12.9	23.1	0.56	5	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	99	26.9	28.1	0.96	18	1994-95
1st Grade Failures	41	12.7	6.8	1.87	37	1994-95
Failures grades 1-3 (approx. %)	64	20.8	11.3	1.84	37	1994-95
Overage for Grade 3	48	19.8	16.2	1.22	33	1995-96
Special Education (ages 8 and 9)	111	20.7	15.3	1.35	45	1995-96
School Achievement						
Special Education Grades 1 - 12	567	17.3	13.0	1.33	42	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	97	40.1	27.9	1.44	38	1995-96
Grade 8 BSAP - Math (Below standards)	158	59.2	34.8	1.70	46	1995-96
Grade 8 BSAP - Reading (Below standards)	142	52.8	28.8	1.83	45	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	110	42.5	29.5	1.44	38	1995-96
Exit Exam (Not passing all parts on 1st attempt)	126	55.5	35.3	1.57	41	1995-96
Dropout Rate	493	34.9	27.3	1.28	39	1992-95
25-34 Year olds with no HS Degree or GED	751	22.1	19.1	1.16	17	1990
Adolescent Risk Behavior						
Not in School or Employed	180	11.5	9.6	1.20	30	1990
Pregnancy (Ages 14 - 17)	47	6.4	4.8	1.33	37	1994
Alcohol Use (High School)	285	30.6	37.4	0.82	9	1992-93
Drug Use (High School)	61	6.5	12.8	0.51	9	1992-93
Binge Drinking (5 or more drinks)	87	9.3	16.3	0.57	3	1992-93
Delinquency (ages 15 - 17)	59	5.2	6.4	0.81	14	1994-95

* 1 = "best" 46 = "worst"

FAIRFIELD TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	34	8.9	1.35	1992	20	5.8	0.88	1993	32	9.6	1.32	1994
Births to Mothers Not Completing High School	90	23.5	1.00	1992	78	22.7	1.01	1993	65	19.5	0.89	1994
Births to Single Mothers	174	45.4	1.50	1992	150	43.7	1.44	1993	153	45.8	1.51	1994
Children in Single-Parent Families		14.3	0.99	1970		21.0	1.11	1980	1,546	29.9	1.19	1990
Economic Status												
Poor Children		44.2	1.54	1969		26.1	1.23	1979	1,675	26.4	1.26	1989
Mean Income of Families with Children					27,875	N/A	1.19	1979	29,109	N/A	1.22	1989
Health												
Less than Adequate Prenatal Care	191	49.9	1.26	1992	174	50.7	1.44	1993	148	44.3	1.38	1994
Low Birth Weight	38	9.9	1.10	1992	38	11.1	1.19	1993	36	10.8	1.17	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	52	14.4	0.54	1990-91	50	15.7	0.56	1992-93	99	26.9	0.96	1994-95
1st Grade Failures	47	13.6	1.51	1991-92	37	12.0	1.24	1992-93	41	12.7	1.87	1994-95
Failures Grades 1-3 (approx. %)	73	22.2	1.57	1991-92	60	20.1	1.41	1992-93	64	20.8	1.84	1994-95
Overage for Grade 3	75	27.7	1.07	1991-92	83	28.5	1.39	1993-94	48	19.8	1.22	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	85	30.4	1.58	1991-92	115	40.8	2.06	1993-94	97	40.1	1.44	1995-96*
Grade 8 BSAP - Math (Below Standards)	134	46.5	1.72	1991-92	178	58.2	1.88	1993-94	158	59.2	1.70	1995-96
Grade 8 BSAP - Reading (Below Standards)	117	40.8	1.67	1991-92	156	51.3	1.78	1993-94	142	52.8	1.83	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	121	37.0	1.69	1991-92	146	44.1	1.81	1993-94	110	42.5	1.44	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	122	47.5	1.53	1991-92	129	55.6	1.70	1993-94	126	55.5	1.57	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	44	6.1	1.30	1992	28	3.8	0.84	1993	47	6.4	1.33	1994
Alcohol Use (High School)	285	25.1	0.62	1989-90					285	30.6	0.82	1992-93
Drug Use (High School)	91	8.0	0.60	1989-90					61	6.5	0.51	1992-93
Binge Drinking (5 or more drinks)		7.3	0.47	1989-90					87	9.3	0.57	1992-93

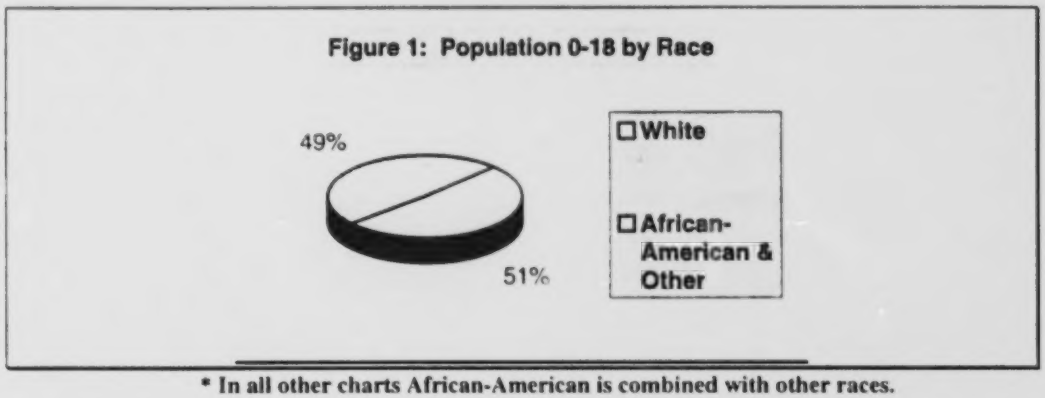
SOUTH CAROLINA kids count

1996 Report FLORENCE

DEMOGRAPHICS

In 1994, there were 34,270 children under age 18 in the county. Of these, 17,490 were White and 16,780 were African-American and Other races. There were 35,539 children under age 18 in 1980, 34,904 in 1970, and 37,803 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 28.3% of the population in 1994, down from 44.8% in 1960, 38.9% in 1970 and 32.3% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 37.4% of all households in 1990, as compared with 51.0% of households in 1960, had children below the age of 18.

Births to Teen Mothers: In 1994, 126 babies were born to mothers younger than age 18. These babies were 7.3% of all children born in the county; 3.8% of all White babies and 11.1% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 78.6% were born to single mothers.

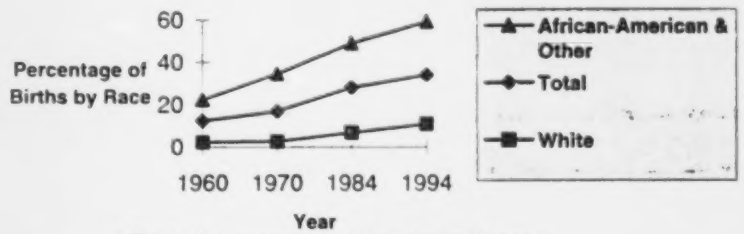
In 1994, 311 babies were born to mothers younger than age 20. These babies were 18.0% of all children born in the county; 11.4% of all White babies and 25.2% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 73.6% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 394 babies, 22.9% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 47.3% in 1970.

Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 587 babies, 34.0% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 28.0% and in 1960 it was 12.3%. In 1994, 10.9% of White children and 59.1% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 107 babies, 6.2% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 694, constituting 40.3% of all babies, 16.2% of White babies, and 66.3% of African-American and Others.

Figure 2: Births to Single Mothers *

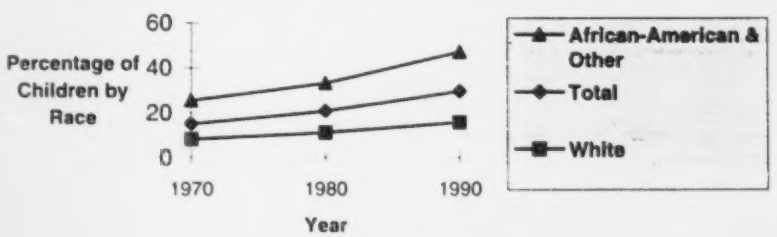


* Excluding paternity acknowledged cases

Divorce Rate: In 1994, 1,256 marriage licenses were issued, while 521 divorce decrees involving 433 children were filed. In 1970 only 170 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 8,168 children lived with only one parent. This was 29.6% of all children, up from 20.7% in 1980 and 15.1% in 1970. In 1990, 15.7% of White children and 46.9% of African-American and Other children lived in single-parent families.

Figure 3: Children Under 18 in Single-Parent Families



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 67.4% of mothers with children under 6 and 76.2% with children 6 - 17 were in the labor force. This has increased substantially from 34.3% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

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Abuse and Neglect: In 1995-96, there were 1,142 children investigated as alleged child abuse and neglect victims: 29.0% for physical abuse, 13.0% for sexual abuse, 70.8% for neglect, and 38.6% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 259 children were victims of abuse and neglect: of these 47.5% were male and 52.5% were female; 35.5% were White, and 64.5% were African-American and Other. By age, 45.2% were 0 - 5, 36.3% were 6 - 12, and 18.5% were 13 - 17. They constituted 0.7% of all children age 18 or younger; 0.5% of all Whites and 1.0% of all African-Americans and Others. In the verified cases, 8.1% of abused and neglected children lived in two parent families, 66.4% in single parent families, 1.5% with extended families, and 23.9% in other circumstances.

Family Violence: In 1994, 843 domestic assaults within families were recorded by law enforcement officials. These domestic assauits comprised 26.0% of all assaults, which include both simple and aggravated assaults. Overall, 58.0% of all domestic assaults involve spouse abuse (constituting 14.8% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 4.8% of all children did not live with their natural parents; of these, 1,139 or 3.5% of children lived with relatives, 331 or 1.0% lived with non-relatives, and 83 were in institutional facilities.

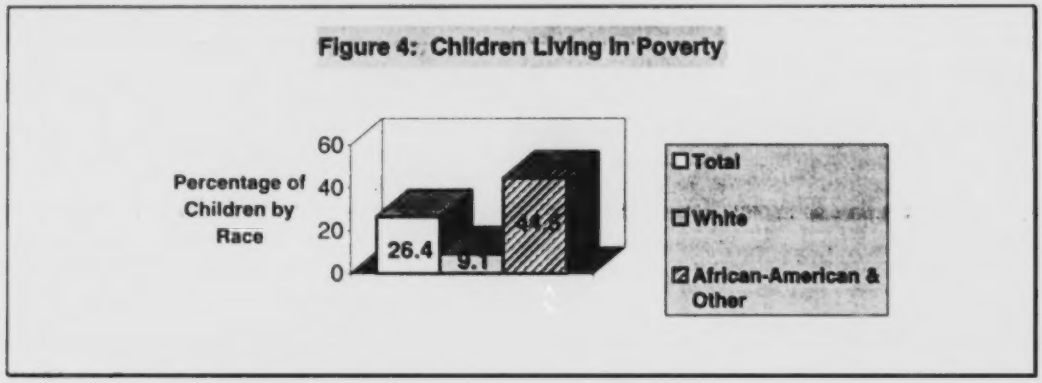
Out of Home Placements: As of September 30, 1996, 195 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 19.5% 0-2, 16.4% 3-5, 22.6% 6-10, 15.9% 11-13, and 25.6% 14 and above. The foster care population is comprised of 52.8% males and 47.2% females. Regarding their future, 46.2% were under a plan for placement in adoptive homes, 28.7% for return to a parent or guardian, 3.1% for placement with a relative, 11.3% for independent living, 9.7% for permanent foster care, and 1.0% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.54 adults for every person below age 18. This was up substantially from 1960, when there were only 1.23 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 8,530 children and youth under the age of 18 lived in families with incomes below poverty. Over 26.4% of all children and youth lived below poverty: 9.1% of Whites and 44.5% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 26.4% in 1989, it was 27.8% in 1979 and 32.4% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 28.3% of children 0 - 5 and 25.6% of children 6 - 17 lived in poverty; 28.0% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 56.8% of children in single-parent families lived in poverty, but only 10.9% of children in married-couple families were poor. Children in single-parent families made up 72.1% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 10,699 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 2,169 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	32,253	8,530	10,699	12,641	14,682	15,449	16,684
Percent		26.4%	33.2%	39.2%	45.5%	47.9%	51.7%
White	16,440	1,488	2,178	2,940	3,862	4,329	4,958
Percent		9.1%	13.2%	17.9%	23.5%	26.3%	30.2%
African-American and Other	15,813	7,042	8,521	9,701	10,820	11,120	11,726
Percent		44.5%	53.9%	61.3%	68.4%	70.3%	74.2%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 13.5% of households did not have a car; 6.1% of Whites and 27.8% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 10.2% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 22.1% of households had no phone.

Income: The mean income of families with children in 1989 was $34,706; in 1979, it had been $32,297, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 11.1%.

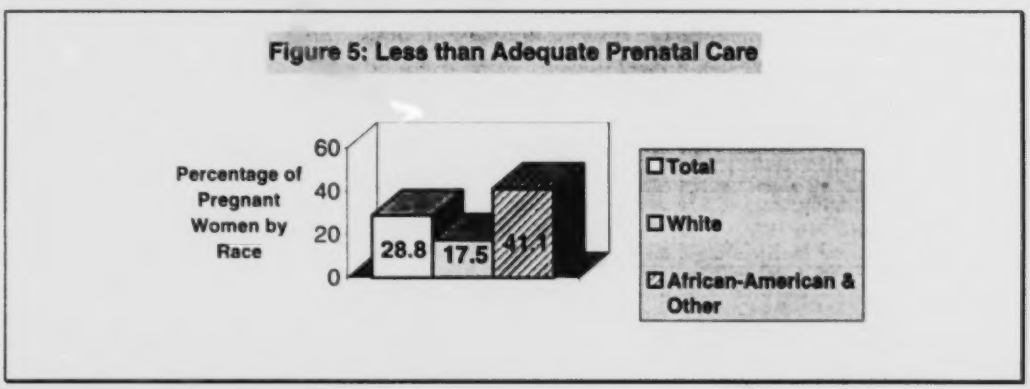
The mean income of single-parent families with children was $14,309 in 1989, as compared with $42,322 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 2,577 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 41.1% had child support court orders. The average monthly payment of child support was $137.63, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 1,274 parents in non-AFDC families were obligated to pay a monthly average of $158.82. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 356 or 20.6% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 497 or 28.8% of pregnant women received less than adequate prenatal care: 157 or 17.5% of Whites and 340 or 41.1% of African-Americans and Others. In that same year, 47 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 196 or 11.4% of all babies in the county were born with low birthweight. Over 15.9% of African-American babies and 7.1% of White babies were born with low birthweight. During 1992-94, approximately 131 or 2.4% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 31.3%. For Whites, the rate decreased by 34.2%, while for African-Americans and Others, the rate decreased by 29.1%. Over the three-year period 1992-94, 22 White and 46 African-American and Other infants died before age one. By comparison, 33 White and 67 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 16 White and 16 African-American and Other children ages 1-14 died in the county. During 1982-84, 19 White and 14 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 50.8% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 17.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 1,350 to 2,025 youth ages 13-19 in the county were infected with a STD. In the county, there were 10 reported cases of children under age 15 and 143 youth ages 15 - 19 infected with gonorrhea; 2 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 14.2% first smoked by age 11, 31.9% by age 13, and 45.1% by age 15. In a typical month, 18.4% of 7th and 8th graders and 25.6% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 33.1% of White 7th to 12th graders used cigarettes, in comparison with 10.8% African-Americans. A smaller but significant group of high school students (4.9%) used smokeless tobacco monthly; it was used primarily by White males (16.2%) compared with 0.9% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 3,427 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 1,099 students in grades 1-12 with learning disabilities and 689 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 2,325 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 5,072 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 32 nurses; 13 are currently available.

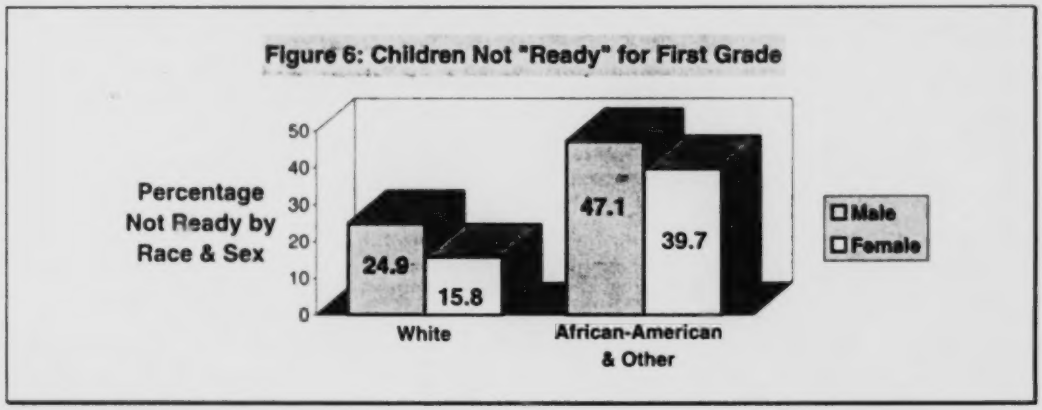
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 38.6% for Whites and 44.2% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

638 children not ready	**34.5% children not ready**

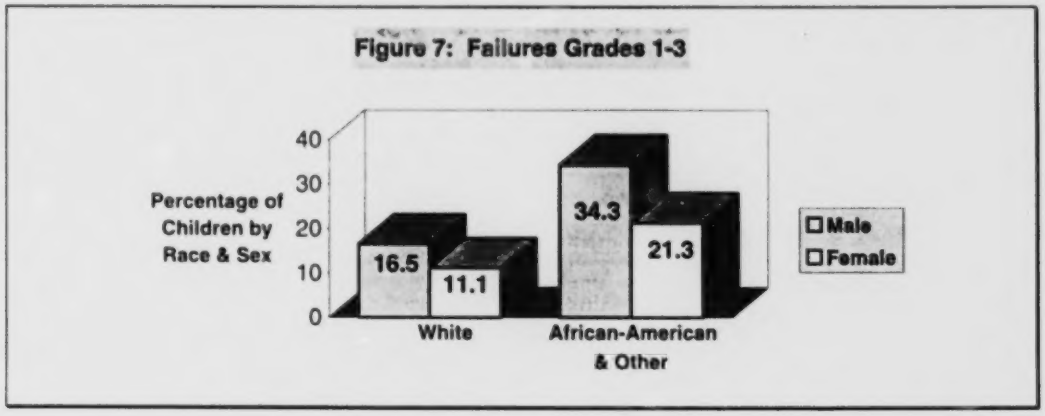


1st Grade Failures in 1995:

189 children failing	**9.7% children failing**

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

420 children failing	**21.9% children failing**



Overage for Grade 3 in 1996:

323 children overage	21.5% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 558 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 15.6% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 34.5% assessed not ready for the 1st grade, 21.5% overage in grade 3, and 15.6% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

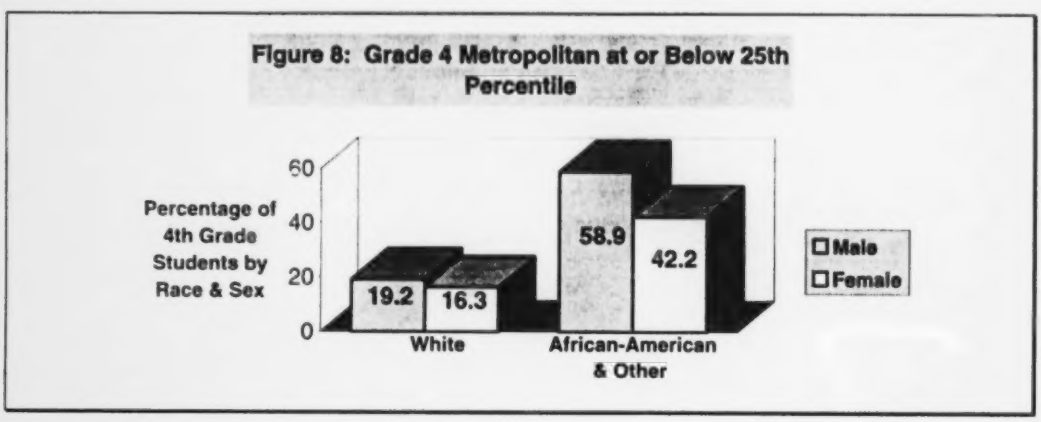
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 689 speech and language impaired, 1,099 learning disabled, 72 emotionally disabled, 692 mentally impaired, and 182 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 13.0% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

579 children at or below 25th percentile	35.4% children at or below 25th percentile



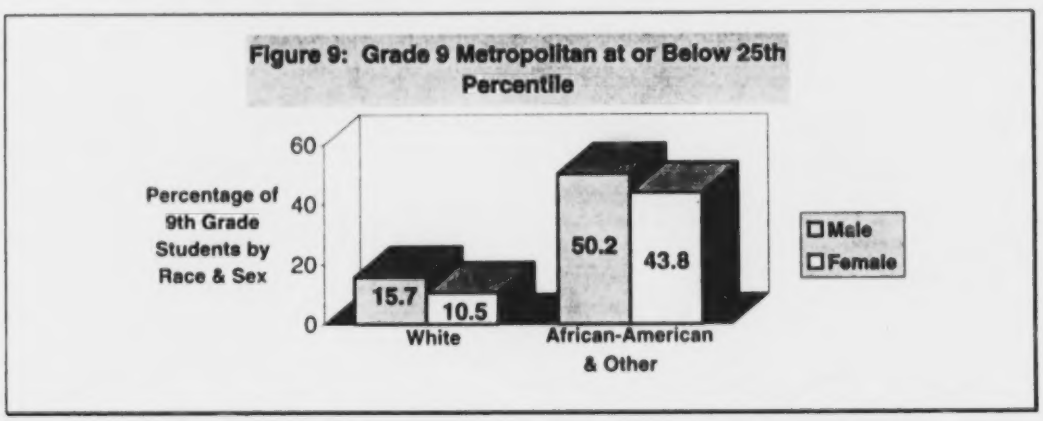
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	612	36.0	511	30.0
White Males	81	19.2	85	20.2
White Females	79	20.6	53	13.7
African-American & Other Males	230	52.2	204	46.4
African-American & Other Females	220	48.7	167	36.9

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

577 students at or below 25th percentile

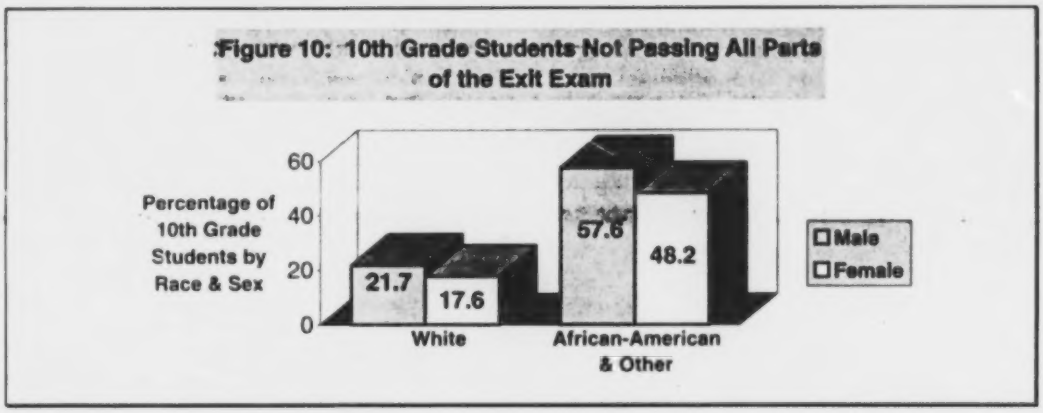
31.4% students at or below 25th percentile



Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

590 students not passing all parts

36.6% students not passing all parts

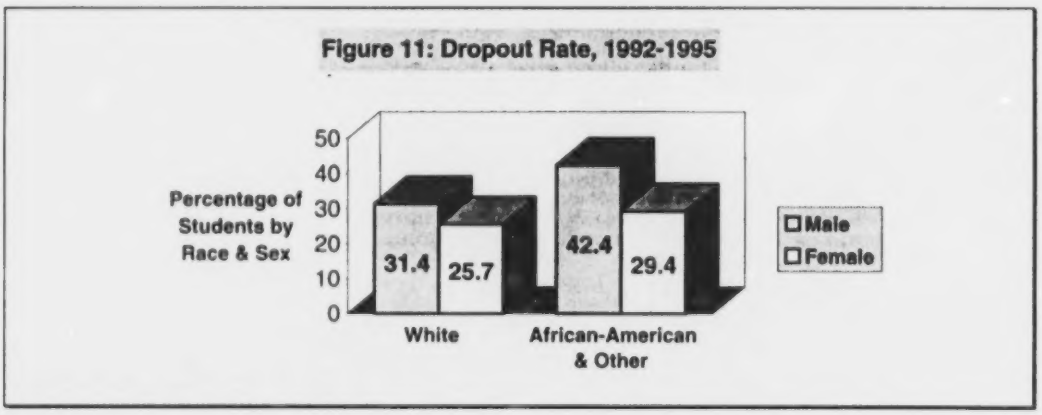


Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 55.5% to 26.8% in math and from 51.9% to 22.9% in reading. During the 1990s the trend altered, with 36.0% not meeting 8th grade math standards in 1996 and 30.0% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 34.8% in 1983 on the CTBS, 31.8% in 1990 on the Stanford, and 34.8% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 32.0% in 1990 and 31.8% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

2,507 students drop out

32.3% students drop out



Dropouts: A distressing number of students drop out and fail to graduate. An average 35.5% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 35.7% during 1985-89, and 36.4% during 1990-94. During the 1995-96 period, 93.3% of all who did graduate received the State High School Diploma, while 4.5% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 2.2% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 116 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 115 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 22.5% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 30.0% to 36.6%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 752 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 9.9% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

6.3%	White Males	13.1%	African-American & Other Males
8.3%	White Females	13.6%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 153 girls between the ages of 14 and 17 became pregnant in 1993 and 152 in 1994. In 1994, this represented 4.0% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 2.5% for Whites and 5.6% for African-Americans and others. Of all pregnancies to 14-17 year olds, 80.3% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 20.8%.

Alcohol Use: In 1992-93, 20.7% of 7th and 8th graders and 34.5% of high schoolers said they had used alcohol in the past month. Of White males, 36.6% had used it in the past month, compared with 25.9% of African-American males; likewise, 34.5% of White females said they had used alcohol, compared with 15.8% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 14.7% had used alcohol by age 11 or younger, 31.9% by age 13, and 53.3% by age 15.

During the previous year, 33.3% of 7th and 8th graders and 41.3% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 28.6% said they had driven after drinking, and 10.8% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 59.3% of eighth graders and 87.2% of seniors felt that beer was easy to get; 52.5% of eighth graders and 46.5% of seniors felt there was not a great risk in using it regularly.

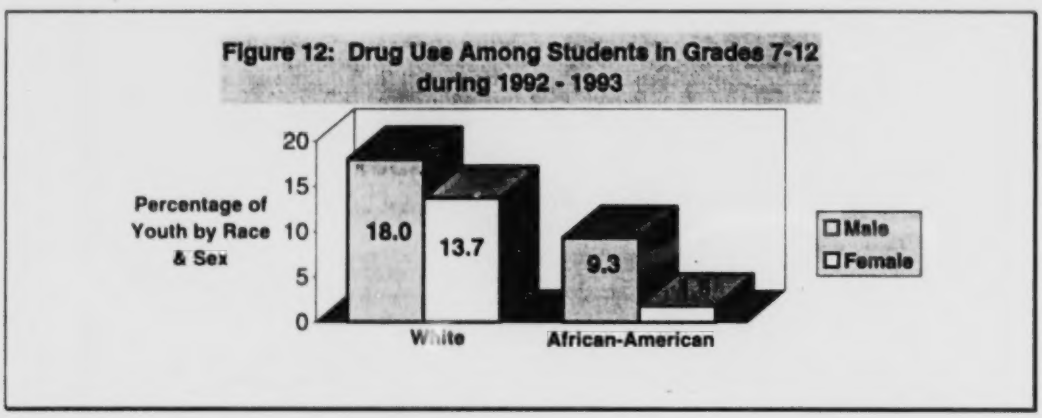
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 27.0% of all high school students in 1992-93 responded 3 or more drinks at a time; 16.5% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 6.8% of 7th and 8th graders and 14.1% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (18.0%) and White females (13.7%); use among African-American males was 9.3%; African-American females, 1.8%. Some young people first used drugs at an early age: among students 15 and older, 3.3% experienced their first use by age 11 or sooner; 9.2% had used a drug by age 13, and 19.4% by age 15.

Of seniors who had initiated use of marijuana, 9.2% had started use at home, 44.0% at a friend's home, and 46.8% elsewhere. During the past year, 4.5% of all high school students said that they used marijuana at home, 10.2% at a friend's house, and 7.9% in a car. In the past year, 8.0% of all high school students who drive and 11.5% of seniors who drive said that they had driven after using drugs . Furthermore, 9.3% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 35.7% of 8th graders who had an opinion said it is easy to get marijuana and 25.3% said it is easy to get cocaine or crack; 79.7% of seniors who had an opinion said it is easy to get marijuana and 63.7% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 22.8% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 752 individual juvenile offenders in the county were referred to the Solicitor; of these, 10.9% were age 12 or younger, 30.1% were 13 or 14, and 59.0% were 15 or older.

Of the referrals to the family court, 11.0% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 306 juvenile cases constituting 29.2% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

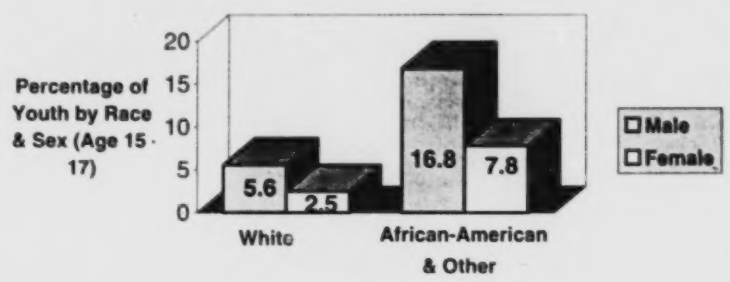
Delinquents are likely to live in families with low income: 49.2% lived in families with income under $10,000, 30.3% with $10,000-$19,999 and 20.5% with $20,000 or more. Furthermore, only 20.6% of delinquents lived with both natural parents, while 54.2% lived in a single parent household and 25.1% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 27.5% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 32.2% had at least one prior referral and 11.8% had been referred to court 3 times or more.

In 1994-95, there were 21 juvenile commitments from the county to State institutions.

During 1994-95, 443 youth ages 15 to 17 were referred to the family courts. In the county, 7.8% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.

Figure 13: Court Referrals



Deaths: During 1990-94, 45 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 18 deaths between 1990 and 1994; homicides killed 6 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 29.6% of children in single-parent families, 26.4% in poverty, 32.3% dropping out of school, 34.5% of high school students using alcohol and 22.8% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

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SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

FLORENCE

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	126	7.3	7.3	1.00	15	1994
Births to Mothers Not Completing High School	394	22.9	21.8	1.05	17	1994
Births to Single Mothers	587	34.0	30.4	1.12	20	1994
Children in Single-Parent Families	8,168	29.6	25.1	1.18	29	1990
Parents Working	9,532	73.6	74.3	0.99	19	1990
Abuse & Neglect Victims	259	0.7	1.0	0.70	10	1995-96
Separation from Parents	1,553	4.8	5.1	0.94	14	1990
Economic Status						
Poor Children	8,530	26.4	21.0	1.26	27	1989
Mean Income of Families with Children	$34,706	NA	NA	0.98	15	1989
Health						
Less than Adequate Prenatal Care	497	28.8	32.0	0.90	15	1994
Low Birth Weight	196	11.4	9.2	1.24	35	1994
Not Adequately Immunized	431	17.0	18.0	0.94	30	1995
Cigarette Smokers (High School)	1,298	25.6	23.1	1.11	36	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	638	34.5	28.1	1.23	40	1994-95
1st Grade Failures	189	9.7	6.8	1.43	32	1994-95
Failures grades 1-3 (approx. %)	420	21.9	11.3	1.94	38	1994-95
Overage for Grade 3	323	21.5	16.2	1.33	38	1995-96
Special Education (ages 8 and 9)	558	15.6	15.3	1.02	24	1995-96
School Achievement						
Special Education Grades 1 - 12	2,734	13.0	13.0	1.00	21	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	579	35.4	27.9	1.27	29	1995-96
Grade 8 BSAP - Math (Below standards)	612	36.0	34.8	1.03	20	1995-96
Grade 8 BSAP - Reading (Below standards)	511	30.0	28.8	1.04	20	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	577	31.4	29.5	1.06	19	1995-96
Exit Exam (Not passing all parts on 1st attempt)	590	36.6	35.3	1.04	18	1995-96
Dropout Rate	2,507	32.3	27.3	1.18	34	1992-95
25-34 Year olds with no HS Degree or GED	4,076	22.5	19.1	1.18	21	1990
Adolescent Risk Behavior						
Not in School or Employed	752	9.9	9.6	1.03	18	1990
Pregnancy (Ages 14 - 17)	152	4.0	4.8	0.83	7	1994
Alcohol Use (High School)	1,750	34.5	37.4	0.92	15	1992-93
Drug Use (High School)	715	14.1	12.8	1.10	38	1992-93
Binge Drinking (5 or more drinks)	837	16.5	16.3	1.01	27	1992-93
Delinquency (ages 15 - 17)	443	7.8	6.4	1.22	35	1994-95

* 1 = "best" 46 = "worst"

FLORENCE TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	133	7.2	1.09	1992	140	7.9	1.20	1993	126	7.3	1.00	1994
Births to Mothers Not Completing High School	449	24.2	1.03	1992	451	25.5	1.14	1993	394	22.9	1.05	1994
Births to Single Mothers	645	34.7	1.15	1992	627	35.4	1.17	1993	587	34.0	1.12	1994
Children in Single-Parent Families		15.1	1.04	1970		20.7	1.10	1980	8,168	29.6	1.18	1990
Economic Status												
Poor Children		32.4	1.13	1969		27.8	1.31	1979	8,530	26.4	1.26	1989
Mean Income of Families with Children					32,297	N/A	1.02	1979	34,706	N/A	1.02	1989
Health												
Less than Adequate Prenatal Care	1,063	57.2	1.45	1992	797	45.1	1.28	1993	497	28.8	0.90	1994
Low Birth Weight	221	11.9	1.32	1992	200	11.3	1.22	1993	196	11.4	1.24	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	611	29.5	1.11	1990-91	571	30.3	1.09	1992-93	638	34.5	1.23	1994-95
1st Grade Failures	192	9.2	1.02	1991-92	279	15.1	1.56	1992-93	189	9.7	1.43	1994-95
Failures Grades 1-3 (approx. %)	382	20.1	1.43	1991-92	374	21.1	1.48	1992-93	420	21.9	1.94	1994-95
Overage for Grade 3	576	34.6	1.33	1991-92	420	25.9	1.26	1993-94	323	21.5	1.33	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	346	19.4	1.01	1991-92	331	19.2	0.97	1993-94	579	35.4	1.27	1995-96*
Grade 8 BSAP - Math (Below Standards)	468	27.1	1.00	1991-92	529	28.3	0.92	1993-94	612	36.0	1.03	1995-96
Grade 8 BSAP - Reading (Below Standards)	475	27.5	1.13	1991-92	521	27.9	0.97	1993-94	511	30.0	1.04	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	373	20.2	0.92	1991-92	446	23.0	0.95	1993-94	577	31.4	1.06	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	430	30.4	0.98	1991-92	538	36.3	1.11	1993-94	590	36.6	1.04	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	147	3.9	0.83	1992	153	4.1	0.91	1993	152	4.0	0.83	1994
Alcohol Use (High School)	1,782	32.8	0.82	1989-90					1,750	34.5	0.92	1992-93
Drug Use (High School)	646	11.9	0.89	1989-90					715	14.1	1.10	1992-93
Binge Drinking (5 or more drinks)		13.1	0.84	1989-90					837	16.5	1.01	1992-93

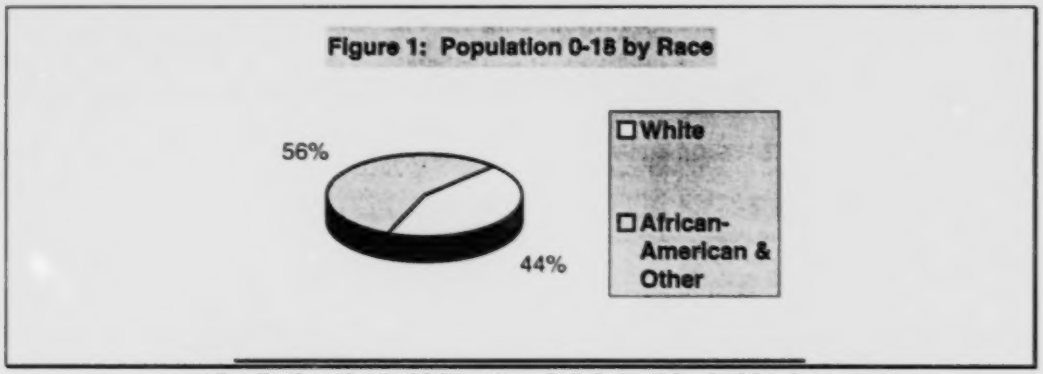
SOUTH CAROLINA kids count

1996 Report GEORGETOWN

DEMOGRAPHICS

In 1994, there were 14,700 children under age 18 in the county. Of these, 6,420 were White and 8,280 were African-American and Other races. There were 14,578 children under age 18 in 1980, 14,378 in 1970, and 17,238 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 29.4% of the population in 1994, down from 49.5% in 1960, 42.9% in 1970 and 34.3% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 36.8% of all households in 1990, as compared with 53.0% of households in 1960, had children below the age of 18.

Births to Teen Mothers: In 1994, 59 babies were born to mothers younger than age 18. These babies were 8.0% of all children born in the county; 7.6% of all White babies and 8.4% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 76.3% were born to single mothers.

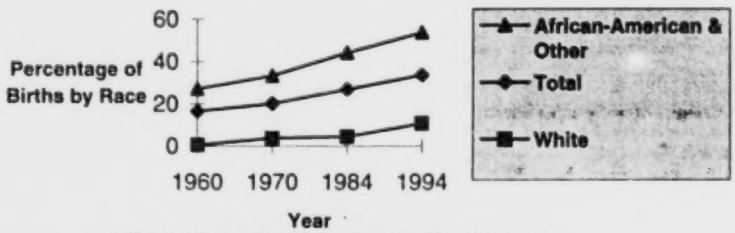
In 1994, 147 babies were born to mothers younger than age 20. These babies were 19.9% of all children born in the county; 15.1% of all White babies and 24.2% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 65.3% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 177 babies, 24.0% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 51.7% in 1970.

Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 248 babies, 33.6% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 26.9% and in 1960 it was 16.5%. In 1994, 10.8% of White children and 53.7% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 56 babies, 7.6% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 304, constituting 41.2% of all babies, 16.6% of White babies, and 62.8% of African-American and Others.

Figure 2: Births to Single Mothers *

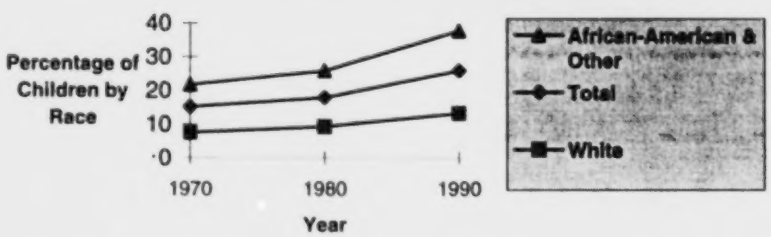


* Excluding paternity acknowledged cases

Divorce Rate: In 1994, 506 marriage licenses were issued, while 189 divorce decrees involving 164 children were filed. In 1970 only 69 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 3,009 children lived with only one parent. This was 25.8% of all children, up from 17.8% in 1980 and 15.1% in 1970. In 1990, 13.2% of White children and 37.6% of African-American and Other children lived in single-parent families.

Figure 3: Children Under 18 in Single-Parent Families



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 70.5% of mothers with children under 6 and 76.0% with children 6 - 17 were in the labor force. This has increased substantially from 30.0% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 487 children investigated as alleged child abuse and neglect victims: 36.3% for physical abuse, 5.5% for sexual abuse, 63.4% for neglect, and 26.9% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 52 children were victims of abuse and neglect: of these 44.2% were male and 55.8% were female; 21.2% were White, and 78.8% were African-American and Other. By age, 42.3% were 0 - 5, 34.6% were 6 - 12, and 23.1% were 13 - 17. They constituted 0.3% of all children age 18 or younger; 0.2% of all Whites and 0.5% of all African-Americans and Others. In the verified cases, 5.8% of abused and neglected children lived in two parent families, 59.6% in single parent families, 11.5% with extended families, and 23.1% in other circumstances.

Family Violence: In 1994, 532 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 29.0% of all assaults, which include both simple and aggravated assaults. Overall, 57.0% of all domestic assaults involve spouse abuse (constituting 16.5% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 7.9% of all children did not live with their natural parents; of these, 883 or 6.3% of children lived with relatives, 215 or 1.5% lived with non-relatives, and 0 were in institutional facilities.

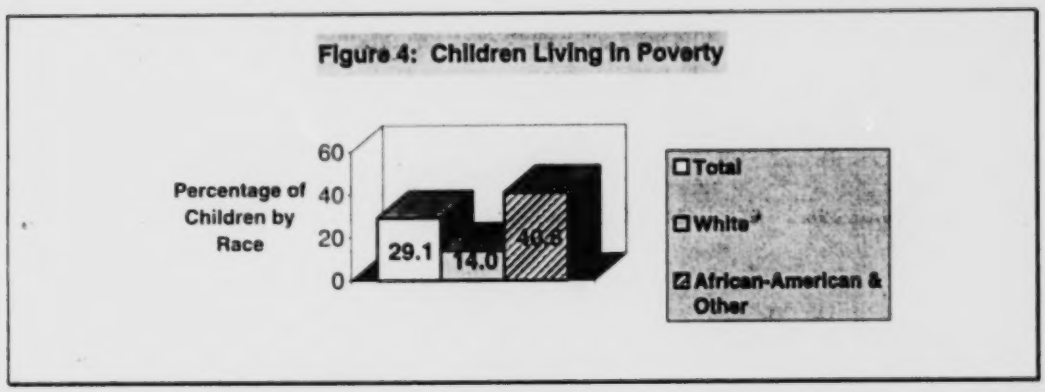
Out of Home Placements: As of September 30, 1996, 60 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 3.3% 0-2, 13.3% 3-5, 28.3% 6-10, 18.3% 11-13, and 36.7% 14 and above. The foster care population is comprised of 50.0% males and 50.0% females. Regarding their future, 40.0% were under a plan for placement in adoptive homes, 31.7% for return to a parent or guardian, 3.3% for placement with a relative, 13.3% for independent living, 11.7% for permanent foster care, and 0.0% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.4 adults for every person below age 18. This was up substantially from 1960, when there were only 1.02 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 4,004 children and youth under the age of 18 lived in families with incomes below poverty. Over 29.1% of all children and youth lived below poverty: 14.0% of Whites and 40.8% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 29.1% in 1989, it was 26.7% in 1979 and 44.5% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 27.4% of children 0 - 5 and 29.8% of children 6 - 17 lived in poverty; 21.6% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 59.3% of children in single-parent families lived in poverty, but only 14.6% of children in married-couple families were poor. Children in single-parent families made up 64.0% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 5,283 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 1,279 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	13,778	4,004	5,283	6,661	7,639	7,939	8,433
Percent		29.1%	38.3%	48.3%	55.4%	57.6%	61.2%
White	6,018	841	1,139	1,630	2,019	2,195	2,365
Percent		14.0%	18.9%	27.1%	33.5%	36.5%	39.3%
African-American and Other	7,760	3,163	4,144	5,031	5,620	5,744	6,068
Percent		40.8%	53.4%	64.8%	72.4%	74.0%	78.2%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 15.2% of households did not have a car; 4.7% of Whites and 33.2% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 11.0% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 24.3% of households had no phone.

Income: The mean income of families with children in 1989 was $29,983; in 1979, it had been $33,357, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 16.8%.

The mean income of single-parent families with children was $12,595 in 1989, as compared with $36,368 in married-couple families with children.

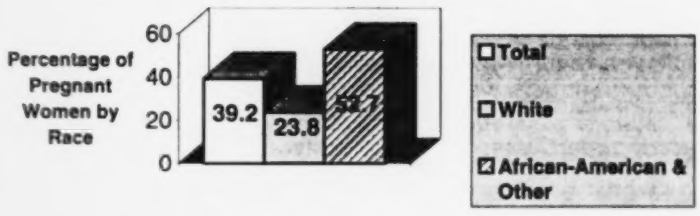
Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 696 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 40.8% had child support court orders. The average monthly payment of child support was $155.30, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 349 parents in non-AFDC families were obligated to pay a monthly average of $192.95. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 259 or 35.1% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 289 or 39.2% of pregnant women received less than adequate prenatal care: 82 or 23.8% of Whites and 207 or 52.7% of African-Americans and Others. In that same year, 16 women received no prenatal care at all.

Figure 5: Less than Adequate Prenatal Care



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 87 or 11.8% of all babies in the county were born with low birthweight. Over 15.5% of African-American babies and 7.6% of White babies were born with low birthweight. During 1992-94, approximately 48 or 2.2% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 1.1%. For Whites, the rate increased by 43.0%, while for African-Americans and Others, the rate decreased by 11.1%. Over the three-year period 1992-94, 10 White and 25 African-American and Other infants died before age one. By comparison, 7 White and 29 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 5 White and 9 African-American and Other children ages 1-14 died in the county. During 1982-84, 6 White and 4 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 44.7% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 17.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 554 to 831 youth ages 13-19 in the county were infected with a STD. In the county, there was 1 reported case of children under age 15 and 46 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 13.2% first smoked by age 11, 29.9% by age 13, and 40.8% by age 15. In a typical month, 13.5% of 7th and 8th graders and 21.3% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 32.0% of White 7th to 12th graders used cigarettes, in comparison with 7.1% African-Americans. A smaller but significant group of high school students (4.8%) used smokeless tobacco monthly; it was used primarily by White males (19.0%) compared with 0.5% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 1,470 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 549 students in grades 1-12 with learning disabilities and 275 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 995 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 2,176 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 14 nurses; 11 are currently available.

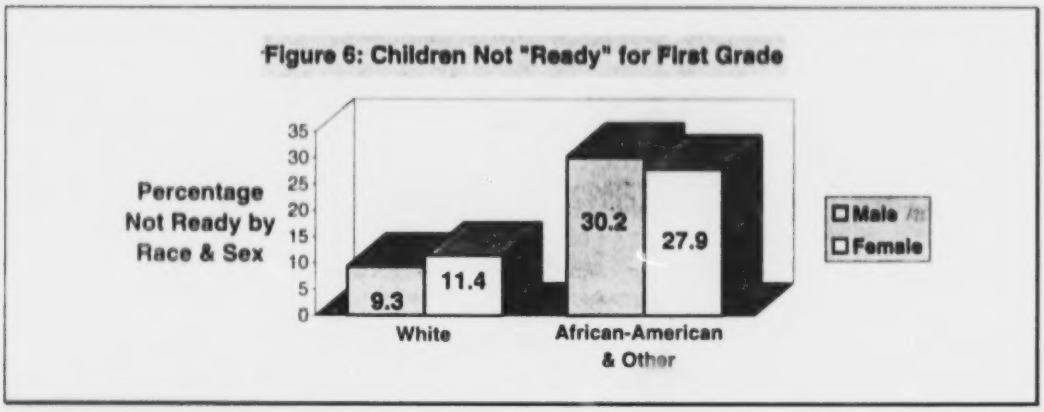
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 29.9% for Whites and 38.0% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

190 children not ready	21.5% children not ready

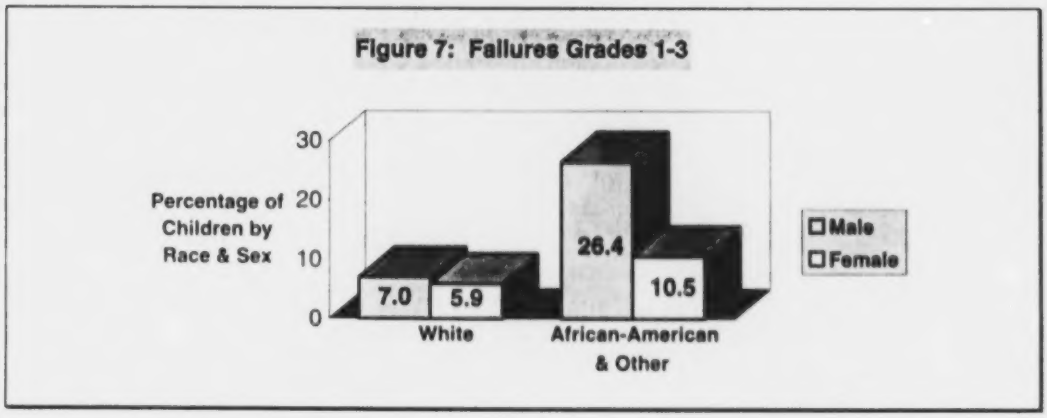


1st Grade Failures in 1995:

68 children failing	7.5% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

122 children failing	13.7% children failing



Overage for Grade 3 in 1996:

109 children overage	16.4% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 290 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 17.6% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 21.5% assessed not ready for the 1st grade, 16.4% overage in grade 3, and 17.6% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

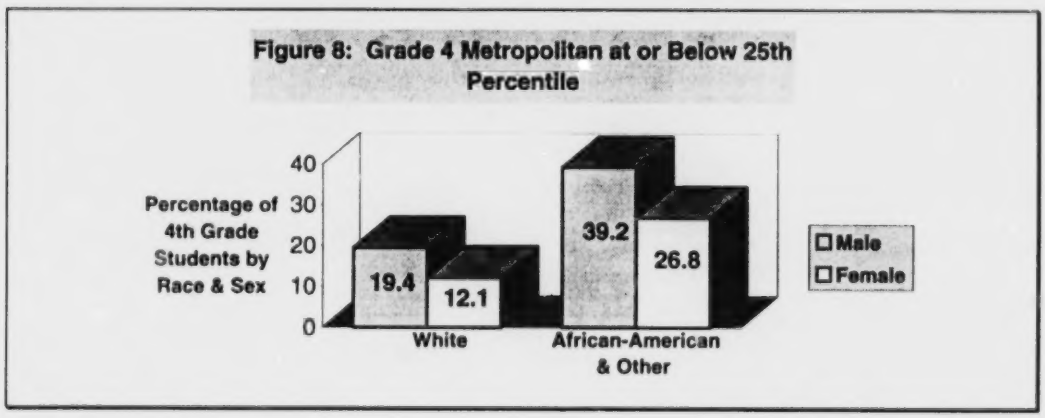
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 275 speech and language impaired, 549 learning disabled, 124 emotionally disabled, 378 mentally impaired, and 42 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 14.1% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

194 children at or below 25th percentile	25.7% children at or below 25th percentile



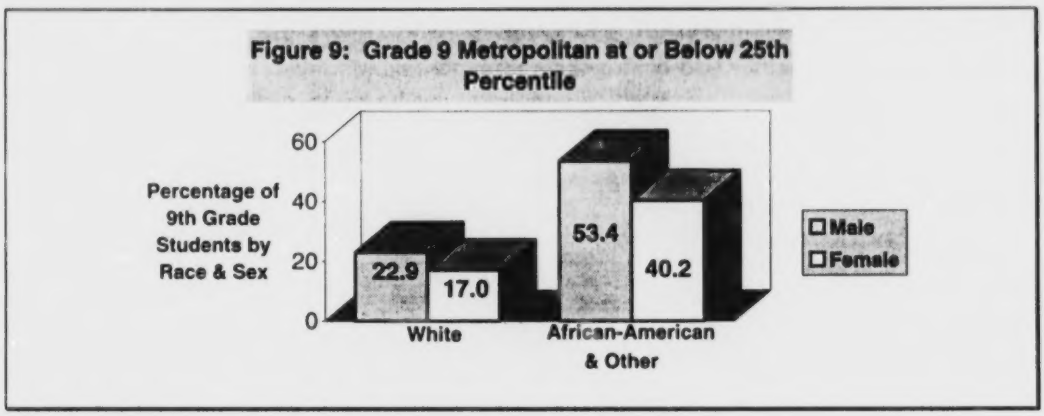
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	295	35.9	240	29.4
White Males	45	23.4	39	20.4
White Females	51	26.0	34	17.4
African-American & Other Males	95	47.0	88	44.4
African-American & Other Females	103	45.8	77	34.2

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

281 students at or below 25th percentile

34.4% students at or below 25th percentile

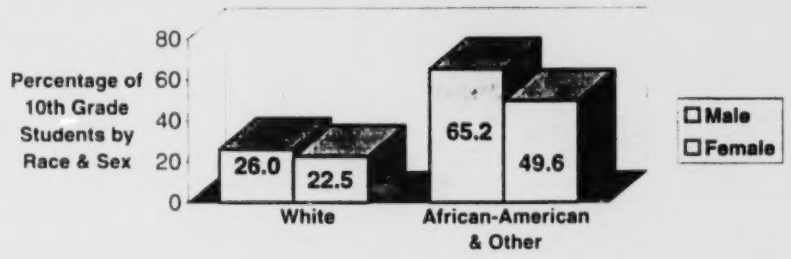


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

290 students not passing all parts

42.4% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



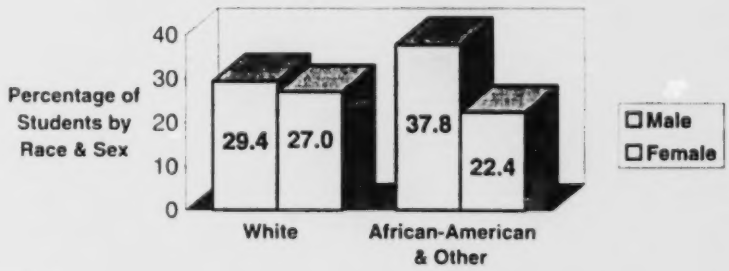
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 66.3% to 24.8% in math and from 60.0% to 18.3% in reading. During the 1990s the trend altered, with 35.9% not meeting 8th grade math standards in 1996 and 29.4% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 37.7% in 1983 on the CTBS, 34.6% in 1990 on the Stanford, and 31.4% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 35.3% in 1990 and 31.2% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

912 students drop out

29.0% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 31.5% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 30.4% during 1985-89, and 26.9% during 1990-94. During the 1995-96 period, 95.4% of all who did graduate received the State High School Diploma, while 1.5% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 3.1% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 87 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 47 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 27.3% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 25.7% to 42.4%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 355 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 11.8% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

8.1%	White Males	9.3%	African-American & Other Males
12.4%	White Females	17.7%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 68 girls between the ages of 14 and 17 became pregnant in 1993 and 81 in 1994. In 1994, this represented 5.2% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 4.9% for Whites and 5.5% for African-Americans and others. Of all pregnancies to 14-17 year olds, 71.6% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it increased by 7.8%.

Alcohol Use: In 1992-93, 27.1% of 7th and 8th graders and 44.0% of high schoolers said they had used alcohol in the past month. Of White males, 48.4% had used it in the past month, compared with 33.3% of African-American males; likewise, 42.4% of White females said they had used alcohol, compared with 28.9% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 16.8% had used alcohol by age 11 or younger, 37.1% by age 13, and 58.4% by age 15.

During the previous year, 37.3% of 7th and 8th graders and 50.2% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 33.3% said they had driven after drinking, and 12.3% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol: Among students who expressed an opinion, 61.3% of eighth graders and 89.3% of seniors felt that beer was easy to get; 54.6% of eighth graders and 53.5% of seniors felt there was not a great risk in using it regularly.

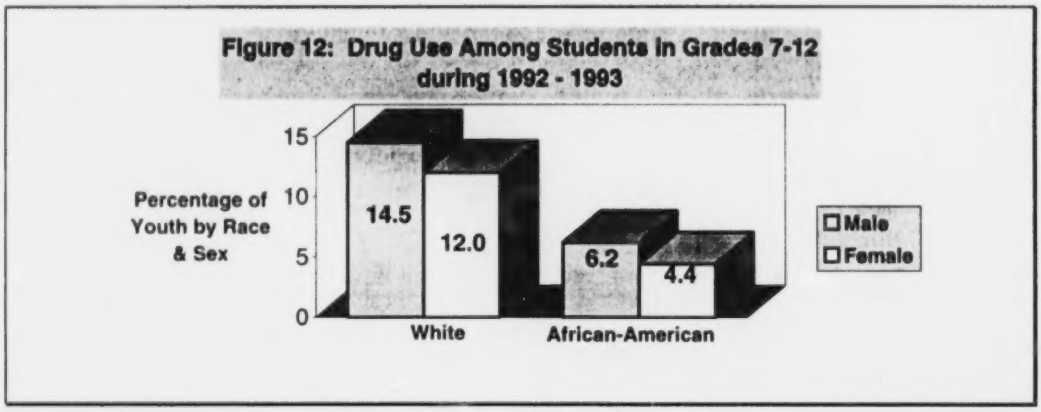
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 31.1% of all high school students in 1992-93 responded 3 or more drinks at a time; 17.5% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 4.6% of 7th and 8th graders and 11.5% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (14.5%) and White females (12.0%); use among African-American males was 6.2%; African-American females, 4.4%. Some young people first used drugs at an early age: among students 15 and older, 2.6% experienced their first use by age 11 or sooner; 7.5% had used a drug by age 13, and 15.0% by age 15.

Of seniors who had initiated use of marijuana, 7.0% had started use at home, 33.2% at a friend's home, and 59.9% elsewhere. During the past year, 3.7% of all high school students said that they used marijuana at home, 8.5% at a friend's house, and 6.7% in a car. In the past year, 6.4% of all high school students who drive and 8.2% of seniors who drive said that they had driven after using drugs . Furthermore, 4.3% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 28.9% of 8th graders who had an opinion said it is easy to get marijuana and 20.9% said it is easy to get cocaine or crack; 76.4% of seniors who had an opinion said it is easy to get marijuana and 63.2% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 18.6% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 338 individual juvenile offenders in the county were referred to the Solicitor; of these, 19.5% were age 12 or younger, 32.0% were 13 or 14, and 48.5% were 15 or older.

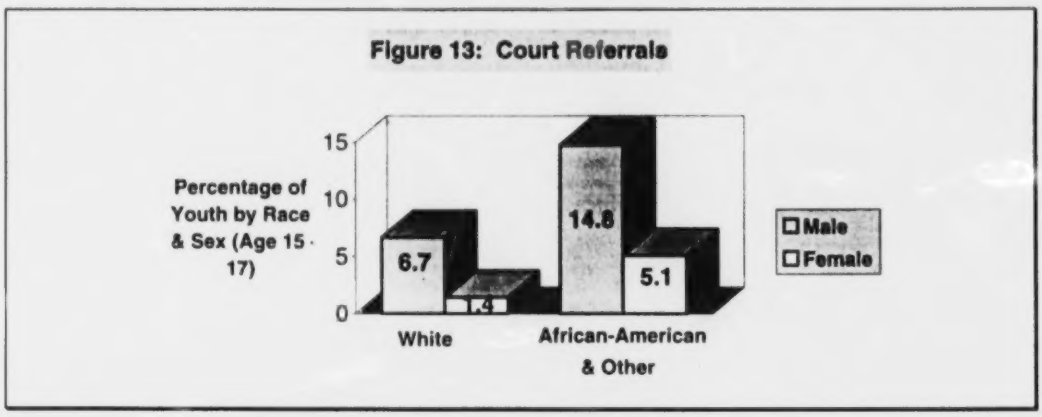
Of the referrals to the family court, 18.3% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 24 juvenile cases constituting 6.2% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 48.3% lived in families with income under $10,000, 27.6% with $10,000-$19,999 and 24.1% with $20,000 or more. Furthermore, only 25.9% of delinquents lived with both natural parents, while 49.1% lived in a single parent household and 24.9% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 44.9% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 42.0% had at least one prior referral and 17.5% had been referred to court 3 times or more.

In 1994-95, there were 12 juvenile commitments from the county to State institutions.

During 1994-95, 164 youth ages 15 to 17 were referred to the family courts. In the county, 7.3% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 15 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 9 deaths between 1990 and 1994; homicides killed 2 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 25.8% of children in single-parent families, 29.1% in poverty, 29.0% dropping out of school, 44.0% of high school students using alcohol and 18.6% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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-or-
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SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
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Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

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SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

GEORGETOWN

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	59	8.0	7.3	1.10	20	1994
Births to Mothers Not Completing High School	177	24.0	21.8	1.10	19	1994
Births to Single Mothers	248	33.6	30.4	1.11	19	1994
Children in Single-Parent Families	3,009	25.8	25.1	1.03	20	1990
Parents Working	3,740	74.3	74.3	1.00	20	1990
Abuse & Neglect Victims	52	0.3	1.0	0.30	1	1995-96
Separation from Parents	1,098	7.9	5.1	1.55	41	1990
Economic Status						
Poor Children	4,004	29.1	21.0	1.39	32	1989
Mean Income of Families with Children	$29,983	NA	NA	0.84	29	1989
Health						
Less than Adequate Prenatal Care	289	39.2	32.0	1.23	36	1994
Low Birth Weight	87	11.8	9.2	1.28	42	1994
Not Adequately Immunized	98	17.0	18.0	0.94	30	1995
Cigarette Smokers (High School)	477	21.3	23.1	0.92	24	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	190	21.5	28.1	0.77	4	1994-95
1st Grade Failures	68	7.5	6.8	1.10	25	1994-95
Failures grades 1-3 (approx. %)	122	13.7	11.3	1.21	28	1994-95
Overage for Grade 3	109	16.4	16.2	1.01	22	1995-96
Special Education (ages 8 and 9)	290	17.6	15.3	1.15	35	1995-96
School Achievement						
Special Education Grades 1 - 12	1,368	14.1	13.0	1.08	29	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	194	25.7	27.9	0.92	15	1995-96
Grade 8 BSAP - Math (Below standards)	295	35.9	34.8	1.03	19	1995-96
Grade 8 BSAP - Reading (Below standards)	240	29.4	28.8	1.02	18	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	281	34.4	29.5	1.17	27	1995-96
Exit Exam (Not passing all parts on 1st attempt)	290	42.4	35.3	1.20	26	1995-96
Dropout Rate	912	29.0	27.3	1.06	26	1992-95
25-34 Year olds with no HS Degree or GED	1,903	27.3	19.1	1.43	35	1990
Adolescent Risk Behavior						
Not in School or Employed	355	11.8	9.6	1.23	32	1990
Pregnancy (Ages 14 - 17)	81	5.2	4.8	1.08	26	1994
Alcohol Use (High School)	985	44.0	37.4	1.18	45	1992-93
Drug Use (High School)	257	11.5	12.8	0.90	28	1992-93
Binge Drinking (5 or more drinks)	392	17.5	16.3	1.07	32	1992-93
Delinquency (ages 15 - 17)	164	7.3	6.4	1.14	31	1994-95

* 1 = "best" 46 = "worst"

GEORGETOWN TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	50	6.7	1.02	1992	56	7.7	1.17	1993	59	8.0	1.10	1994
Births to Mothers Not Completing High School	182	24.3	1.03	1992	191	26.3	1.17	1993	177	24.0	1.10	1994
Births to Single Mothers	268	35.8	1.18	1992	276	38.1	1.26	1993	248	33.6	1.11	1994
Children in Single-Parent Families		15.1	1.04	1970		17.8	0.94	1980	3,009	25.8	1.03	1990
Economic Status												
Poor Children		44.5	1.55	1969		26.7	1.26	1979	4,004	29.1	1.39	1989
Mean Income of Families with Children					33,357	N/A	0.99	1979	29,983	N/A	1.19	1989
Health												
Less than Adequate Prenatal Care	366	48.9	1.24	1992	310	42.8	1.21	1993	289	39.2	1.23	1994
Low Birth Weight	72	9.6	1.07	1992	73	10.1	1.09	1993	87	11.8	1.28	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	304	33.9	1.27	1990-91	260	29.9	1.08	1992-93	190	21.5	0.77	1994-95
1st Grade Failures	164	19.0	2.11	1991-92	100	12.5	1.29	1992-93	68	7.5	1.10	1994-95
Failures Grades 1-3 (approx. %)	228	27.4	1.94	1991-92	144	18.8	1.31	1992-93	122	13.7	1.21	1994-95
Overage for Grade 3	249	32.6	1.25	1991-92	192	29.2	1.42	1993-94	109	16.4	1.01	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	97	12.3	0.64	1991-92	82	14.4	0.73	1993-94	194	25.7	0.92	1995-96*
Grade 8 BSAP - Math (Below Standards)	264	31.8	1.18	1991-92	288	33.6	1.09	1993-94	295	35.9	1.03	1995-96
Grade 8 BSAP - Reading (Below Standards)	200	24.2	0.99	1991-92	283	33.1	1.15	1993-94	240	29.4	1.02	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	178	21.6	0.99	1991-92	273	30.8	1.27	1993-94	281	34.4	1.17	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	189	31.4	1.01	1991-92	310	38.5	1.18	1993-94	290	42.4	1.20	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	59	3.9	0.83	1992	68	4.5	1.00	1993	81	5.2	1.08	1994
Alcohol Use (High School)	920	36.5	0.91	1989-90					985	44.0	1.18	1992-93
Drug Use (High School)	301	11.9	0.89	1989-90					257	11.5	0.90	1992-93
Binge Drinking (5 or more drinks)		14.6	0.94	1989-90					392	17.5	1.07	1992-93

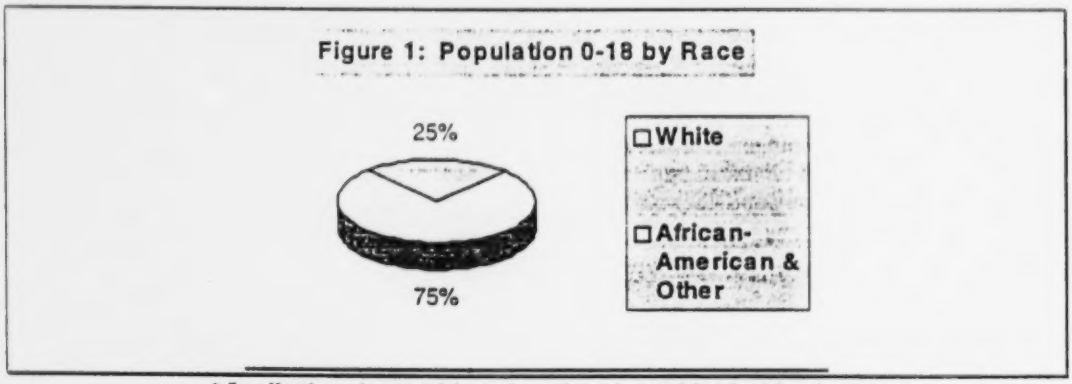
SOUTH CAROLINA kids count

1996 Report GREENVILLE

DEMOGRAPHICS

In 1994, there were 83,090 children under age 18 in the county. Of these, 62,550 were White and 20,540 were African-American and Other races. There were 80,923 children under age 18 in 1980, 83,270 in 1970, and 78,784 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 24.8% of the population in 1994, down from 37.6% in 1960, 34.6% in 1970 and 28.1% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 33.3% of all households in 1990, as compared with 48.0% of households in 1960, had children below the age of 18.

Births to Teen Mothers: In 1994, 272 babies were born to mothers younger than age 18. These babies were 5.9% of all children born in the county; 4.1% of all White babies and 11.6% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 66.5% were born to single mothers.

In 1994, 626 babies were born to mothers younger than age 20. These babies were 13.5% of all children born in the county; 9.8% of all White babies and 25.2% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 57.8% were born to single mothers.

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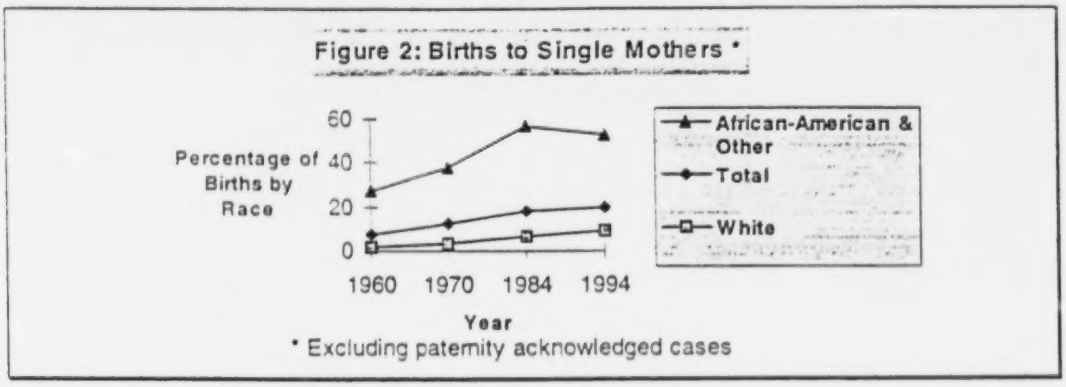
Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 948 babies, 20.5% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 43.0% in 1970.

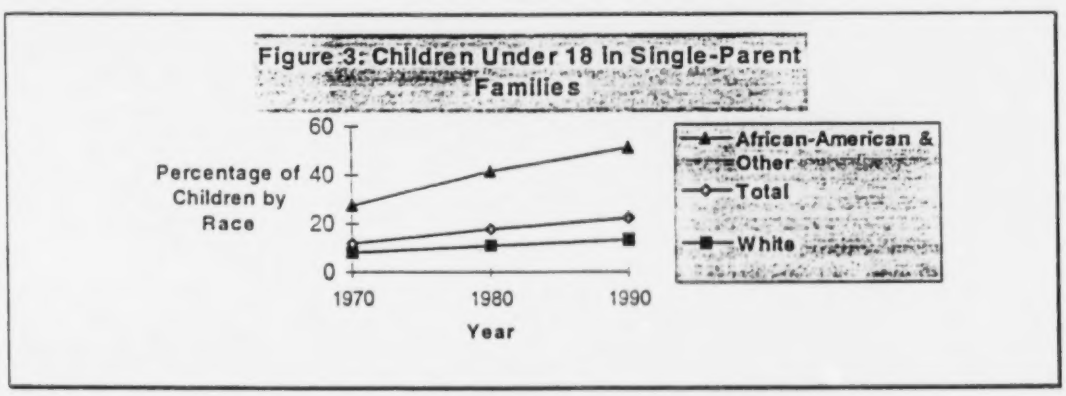
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 907 babies, 19.6% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 18.2% and in 1960 it was 7.6%. In 1994, 9.0% of White children and 52.9% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 347 babies, 7.5% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 1,254, constituting 27.1% of all babies, 14.7% of White babies, and 66.1% of African-American and Others.



Divorce Rate: In 1994, 3,323 marriage licenses were issued, while 1,034 divorce decrees involving 729 children were filed. In 1970 only 942 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 15,689 children lived with only one parent. This was 22.1% of all children, up from 18.1% in 1980 and 11.9% in 1970. In 1990, 13.7% of White children and 51.3% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 64.6% of mothers with children under 6 and 77.8% with children 6 - 17 were in the labor force. This has increased substantially from 36.6% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

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Abuse and Neglect: In 1995-96, there were 2,039 children investigated as alleged child abuse and neglect victims: 27.8% for physical abuse, 10.5% for sexual abuse, 61.1% for neglect, and 23.1% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 501 children were victims of abuse and neglect: of these 47.7% were male and 52.3% were female; 51.7% were White, and 48.3% were African-American and Other. By age, 46.3% were 0 - 5, 35.7% were 6 - 12, and 18.0% were 13 - 17. They constituted 0.6% of all children age 18 or younger; 0.4% of all Whites and 1.2% of all African-Americans and Others. In the verified cases, 22.2% of abused and neglected children lived in two parent families, 50.7% in single parent families, 10.4% with extended families, and 16.8% in other circumstances.

Family Violence: In 1994, 2,491 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 32.0% of all assaults, which include both simple and aggravated assaults. Overall, 59.8% of all domestic assaults involve spouse abuse (constituting 19.0% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 4.3% of all children did not live with their natural parents; of these, 2,092 or 2.6% of children lived with relatives, 1,041 or 1.3% lived with non-relatives, and 243 were in institutional facilities.

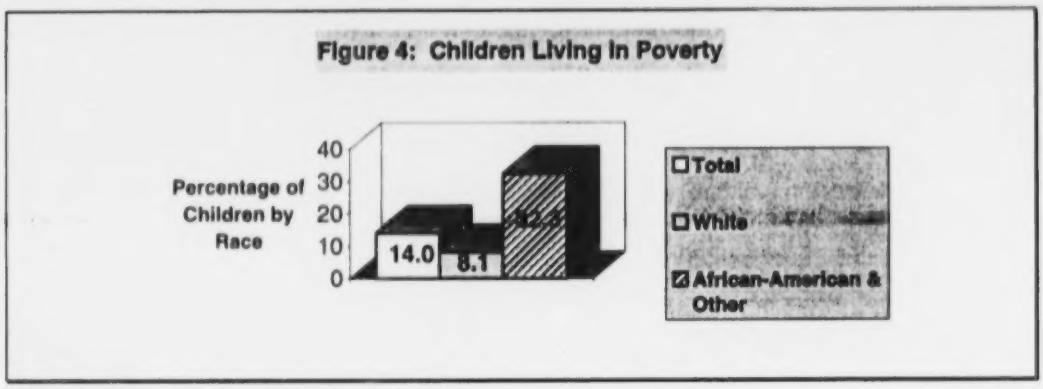
Out of Home Placements: As of September 30, 1996, 305 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 11.5% 0-2, 12.5% 3-5, 27.2% 6-10, 17.7% 11-13, and 31.1% 14 and above. The foster care population is comprised of 52.1% males and 47.9% females. Regarding their future, 13.4% were under a plan for placement in adoptive homes, 67.2% for return to a parent or guardian, 0.7% for placement with a relative, 10.8% for independent living, 7.5% for permanent foster care, and 0.3% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 3.04 adults for every person below age 18. This was up substantially from 1960, when there were only 1.66 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 10,977 children and youth under the age of 18 lived in families with incomes below poverty. Over 14.0% of all children and youth lived below poverty: 8.1% of Whites and 32.3% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 14.0% in 1989, it was 14.9% in 1979 and 16.5% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 16.5% of children 0 - 5 and 12.7% of children 6 - 17 lived in poverty; 15.7% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 39.5% of children in single-parent families lived in poverty, but only 5.2% of children in married-couple families were poor. Children in single-parent families made up 69.8% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 14,494 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 3,517 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	78,225	10,977	14,494	18,571	23,348	25,135	27,767
Percent		14.0%	18.5%	23.7%	29.8%	32.1%	35.5%
White	58,991	4,771	6,699	9,168	12,577	13,781	15,657
Percent		8.1%	11.4%	15.5%	21.3%	23.4%	26.5%
African-American and Other	19,234	6,206	7,795	9,403	10,771	11,354	12,110
Percent		32.3%	40.5%	48.9%	56.0%	59.0%	63.0%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 8.8% of households did not have a car; 5.7% of Whites and 23.8% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 6.7% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 15.4% of households had no phone.

Income: The mean income of families with children in 1989 was $41,007; in 1979, it had been $36,298, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 4.9%.

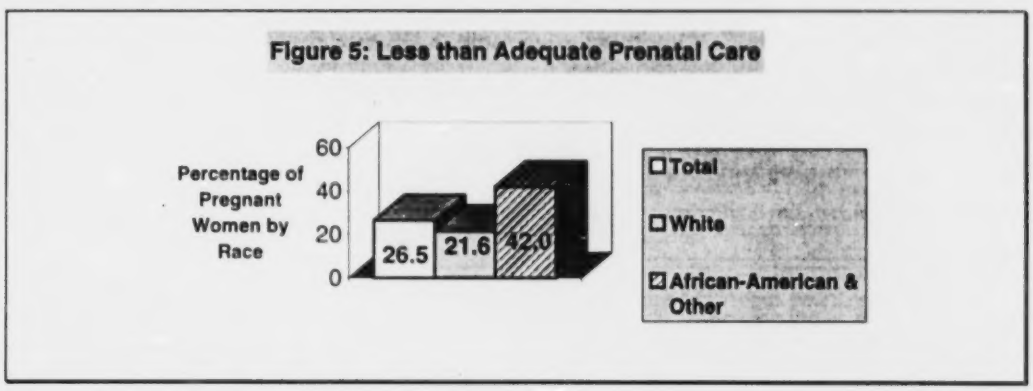
The mean income of single-parent families with children was $17,506 in 1989, as compared with $47,863 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 3,083 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 31.9% had child support court orders. The average monthly payment of child support was $158.88, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 2,113 parents in non-AFDC families were obligated to pay a monthly average of $212.98. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 803 or 17.4% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 1,225 or 26.5% of pregnant women received less than adequate prenatal care: 757 or 21.6% of Whites and 468 or 42.0% of African-Americans and Others. In that same year, 62 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 393 or 8.5% of all babies in the county were born with low birthweight. Over 12.0% of African-American babies and 7.4% of White babies were born with low birthweight. During 1992-94, approximately 210 or 1.5% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 38.9%. For Whites, the rate decreased by 43.8%, while for African-Americans and Others, the rate decreased by 31.4%. Over the three-year period 1992-94, 69 White and 48 African-American and Other infants died before age one. By comparison, 114 White and 61 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 32 White and 23 African-American and Other children ages 1-14 died in the county. During 1982-84, 44 White and 20 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 46.1% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 19.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 3,212 to 4,818 youth ages 13-19 in the county were infected with a STD. In the county, there were 16 reported cases of children under age 15 and 226 youth ages 15 - 19 infected with gonorrhea; 4 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 14.7% first smoked by age 11, 32.7% by age 13, and 45.9% by age 15. In a typical month, 14.6% of 7th and 8th graders and 27.0% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 28.2% of White 7th to 12th graders used cigarettes, in comparison with 4.6% African-Americans. A smaller but significant group of high school students (11.0%) used smokeless tobacco monthly; it was used primarily by White males (27.6%) compared with 0.8% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 8,309 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 3,184 students in grades 1-12 with learning disabilities and 1,797 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 5,438 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 12,297 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 73 nurses; 36 are currently available.

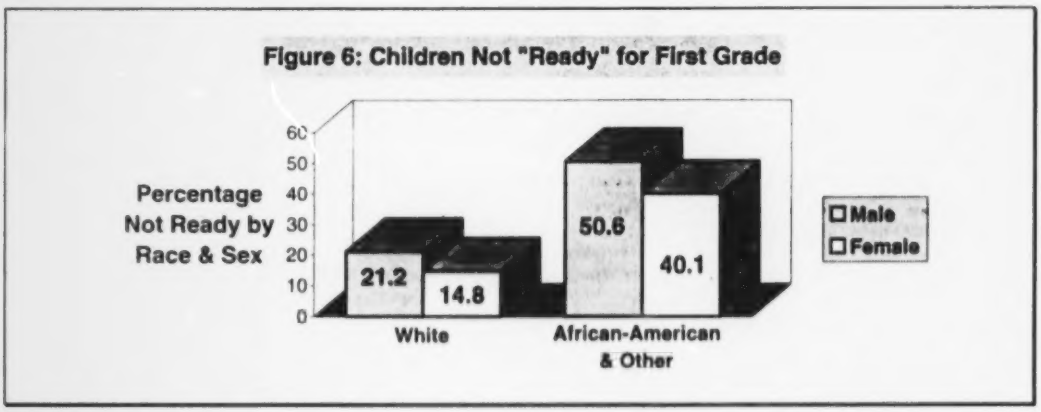
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 22.9% for Whites and 27.0% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

1,345 children not ready	27.2% children not ready

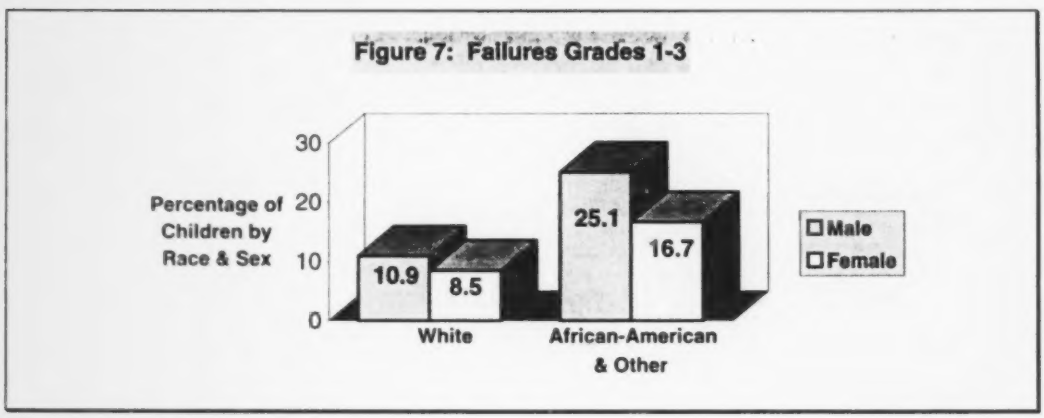


1st Grade Failures in 1995:

403 children failing	8.7% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

599 children failing	13.1% children failing



Overage for Grade 3 in 1996:

825 children overage	20.2% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 1,724 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 19.9% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 27.2% assessed not ready for the 1st grade, 20.2% overage in grade 3, and 19.9% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

SCHOOL ACHIEVEMENT

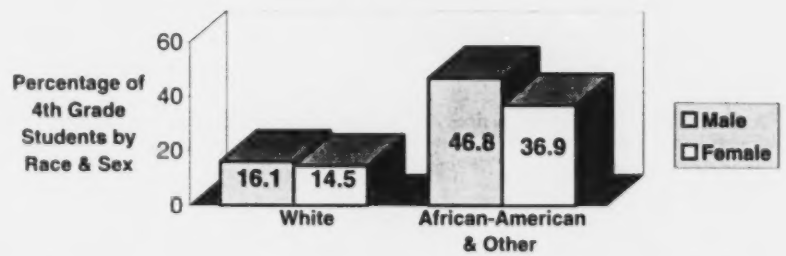
By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 1,797 speech and language impaired, 3,184 learning disabled, 831 emotionally disabled, 1,042 mentally impaired, and 465 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 14.8% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

922 children at or below 25th percentile	22.9% children at or below 25th percentile

Figure 8: Grade 4 Metropolitan at or Below 25th Percentile



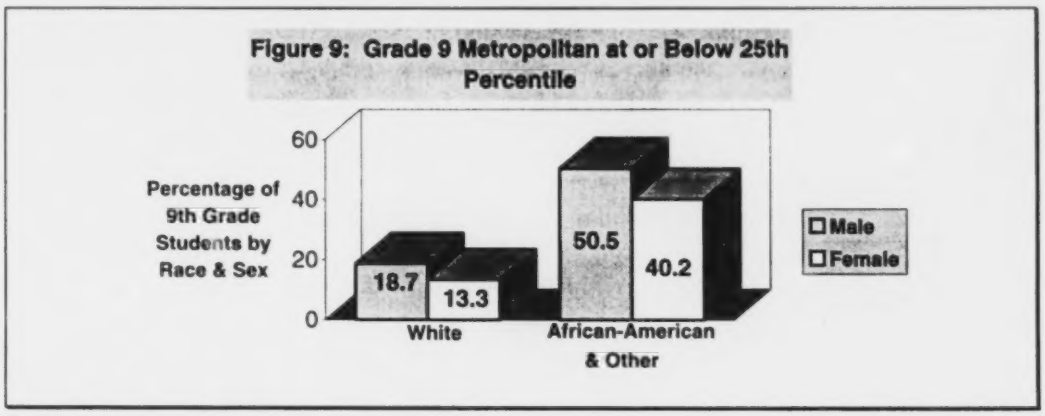
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	1,239	30.5	1,072	26.5
White Males	337	22.0	355	23.3
White Females	344	23.7	234	16.2
African-American & Other Males	256	51.5	262	52.7
African-American & Other Females	294	52.9	212	37.9

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

966 students at or below 25th percentile

23.8% students at or below 25th percentile

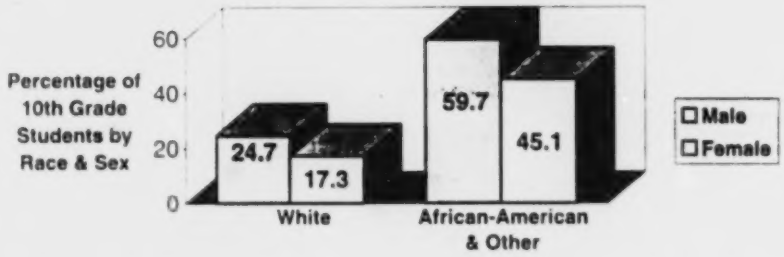


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

975 students not passing all parts

28.6% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



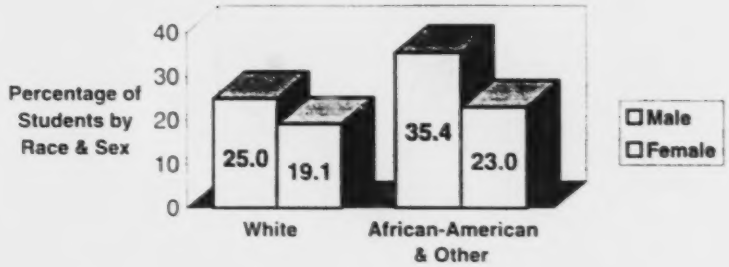
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 49.7% to 23.4% in math and from 39.1% to 21.9% in reading. During the 1990s the trend altered, with 30.5% not meeting 8th grade math standards in 1996 and 26.5% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 23.0% in 1983 on the CTBS, 24.6% in 1990 on the Stanford, and 23.8% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 23.8% in 1990 and 23.3% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

3,795 students drop out

24.0% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 28.1% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 29.8% during 1985-89, and 27.8% during 1990-94. During the 1995-96 period, 95.2% of all who did graduate received the State High School Diploma, while 2.9% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 1.8% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 146 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 406 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 16.4% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 22.9% to 30.5%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 1,722 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 8.9% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

6.3%	White Males	11.9%	African-American & Other Males
8.5%	White Females	15.8%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 357 girls between the ages of 14 and 17 became pregnant in 1993 and 372 in 1994. In 1994, this represented 4.1% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 3.0% for Whites and 7.6% for African-Americans and others. Of all pregnancies to 14-17 year olds, 71.5% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 18.7%.

Alcohol Use: In 1992-93, 19.0% of 7th and 8th graders and 40.4% of high schoolers said they had used alcohol in the past month. Of White males, 37.2% had used it in the past month, compared with 27.7% of African-American males; likewise, 33.2% of White females said they had used alcohol, compared with 21.3% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 16.0% had used alcohol by age 11 or younger, 37.1% by age 13, and 61.1% by age 15.

During the previous year, 29.0% of 7th and 8th graders and 39.4% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 31.5% said they had driven after drinking, and 8.9% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 61.2% of eighth graders and 89.7% of seniors felt that beer was easy to get; 49.0% of eighth graders and 49.3% of seniors felt there was not a great risk in using it regularly.

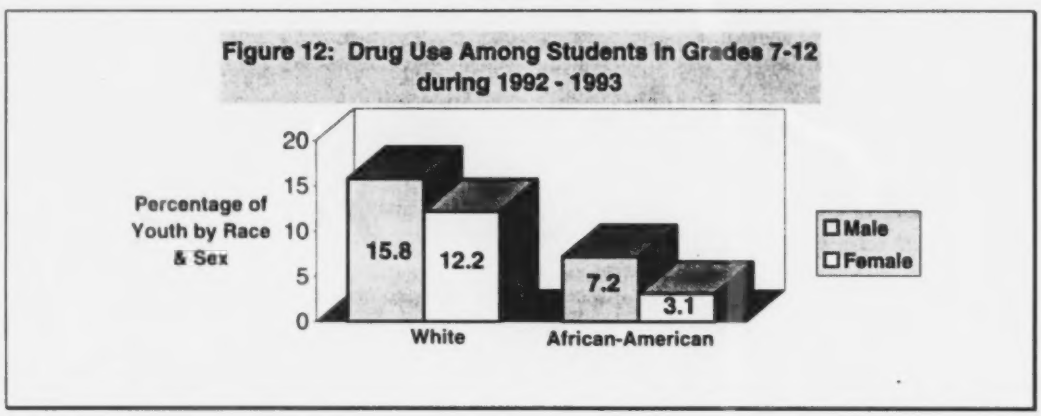
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 31.8% of all high school students in 1992-93 responded 3 or more drinks at a time; 19.1% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 5.7% of 7th and 8th graders and 15.3% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (15.8%) and White females (12.2%); use among African-American males was 7.2%; African-American females, 3.1%. Some young people first used drugs at an early age: among students 15 and older, 3.3% experienced their first use by age 11 or sooner; 9.9% had used a drug by age 13, and 20.2% by age 15.

Of seniors who had initiated use of marijuana, 10.2% had started use at home, 49.5% at a friend's home, and 40.3% elsewhere. During the past year, 5.3% of all high school students said that they used marijuana at home, 12.5% at a friend's house, and 8.3% in a car. In the past year, 7.9% of all high school students who drive and 14.5% of seniors who drive said that they had driven after using drugs . Furthermore, 11.2% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 30.1% of 8th graders who had an opinion said it is easy to get marijuana and 21.9% said it is easy to get cocaine or crack; 78.4% of seniors who had an opinion said it is easy to get marijuana and 62.1% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 24.8% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 1,371 individual juvenile offenders in the county were referred to the Solicitor; of these, 14.7% were age 12 or younger, 33.8% were 13 or 14, and 51.4% were 15 or older.

Of the referrals to the family court, 17.4% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 227 juvenile cases constituting 12.9% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

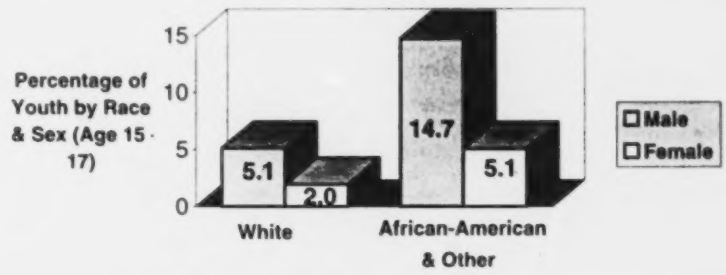
Delinquents are likely to live in families with low income: 45.4% lived in families with income under $10,000, 23.9% with $10,000-$19,999 and 30.6% with $20,000 or more. Furthermore, only 22.2% of delinquents lived with both natural parents, while 47.5% lived in a single parent household and 30.3% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 39.7% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 28.8% had at least one prior referral and 8.3% had been referred to court 3 times or more.

In 1994-95, there were 117 juvenile commitments from the county to State institutions.

During 1994-95, 701 youth ages 15 to 17 were referred to the family courts. In the county, 5.0% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.

Figure 13: Court Referrals



Deaths: During 1990-94, 83 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 45 deaths between 1990 and 1994; homicides killed 10 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 22.1% of children in single-parent families, 14.0% in poverty, 24.0% dropping out of school, 40.4% of high school students using alcohol and 24.8% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

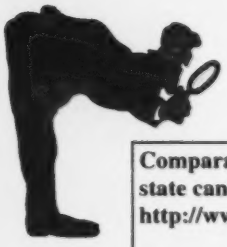
This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

Dr. A. Baron Holmes (803-734-2291) E-mail bholmes@ogc.state.sc.us
-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.



Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

GREENVILLE

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	272	5.9	7.3	0.81	6	1994
Births to Mothers Not Completing High School	948	20.5	21.8	0.94	9	1994
Births to Single Mothers	907	19.6	30.4	0.64	5	1994
Children in Single-Parent Families	15,689	22.1	25.1	0.88	9	1990
Parents Working	25,323	73.4	74.3	0.99	17	1990
Abuse & Neglect Victims	501	0.6	1.0	0.60	7	1995-96
Separation from Parents	3,376	4.3	5.1	0.84	8	1990
Economic Status						
Poor Children	10,977	14.0	21.0	0.67	5	1989
Mean Income of Families with Children	$41,007	NA	NA	1.15	2	1989
Health						
Less than Adequate Prenatal Care	1,225	26.5	32.0	0.83	9	1994
Low Birth Weight	393	8.5	9.2	0.92	14	1994
Not Adequately Immunized	867	19.0	18.0	1.06	37	1995
Cigarette Smokers (High School)	3,259	27.0	23.1	1.17	39	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	1,345	27.2	28.1	0.97	19	1994-95
1st Grade Failures	403	8.7	6.8	1.28	28	1994-95
Failures grades 1-3 (approx. %)	599	13.1	11.3	1.16	23	1994-95
Overage for Grade 3	825	20.2	16.2	1.25	34	1995-96
Special Education (ages 8 and 9)	1,724	19.9	15.3	1.30	42	1995-96
School Achievement						
Special Education Grades 1 - 12	7,319	14.8	13.0	1.14	34	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	922	22.9	27.9	0.82	9	1995-96
Grade 8 BSAP - Math (Below standards)	1,239	30.5	34.8	0.88	11	1995-96
Grade 8 BSAP - Reading (Below standards)	1,072	26.5	28.8	0.92	13	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	966	23.8	29.5	0.81	8	1995-96
Exit Exam (Not passing all parts on 1st attempt)	975	28.6	35.3	0.81	5	1995-96
Dropout Rate	3,795	24.0	27.3	0.88	11	1992-95
25-34 Year olds with no HS Degree or GED	9,152	16.4	19.1	0.86	9	1990
Adolescent Risk Behavior						
Not in School or Employed	1,722	8.9	9.6	0.93	11	1990
Pregnancy (Ages 14 - 17)	372	4.1	4.8	0.85	9	1994
Alcohol Use (High School)	4,877	40.4	37.4	1.08	38	1992-93
Drug Use (High School)	1,847	15.3	12.8	1.20	43	1992-93
Binge Drinking (5 or more drinks)	2,306	19.1	16.3	1.17	40	1992-93
Delinquency (ages 15 - 17)	701	5.0	6.4	0.78	10	1994-95

* 1 = "best" 46 = "worst"

GREENVILLE TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	
Family													
Births to Teen Mothers	288	6.0	0.91	1992	258	5.5	0.83	1993	272	5.9	0.81	1994	
Births to Mothers Not Completing High School	1,143	24.0	1.02	1992	1,053	22.4	1.00	1993	948	20.5	0.94	1994	
Births to Single Mothers	1,023	21.5	0.71	1992	1,045	22.2	0.73	1993	907	19.6	0.64	1994	
Children in Single-Parent Families		11.9	0.82	1970		18.1	0.96	1980	15,689	22.1	0.88	1990	
Economic Status													
Poor Children		16.5	0.57	1969		14.9	0.70	1979	10,977	14.0	0.67	1989	
Mean Income of Families with Children					36,298	N/A	0.91	1979	41,007	N/A	0.87	1989	
Health													
Less than Adequate Prenatal Care	1,093	22.9	0.58	1992	1,205	25.6	0.73	1993	1,225	26.5	0.83	1994	
Low Birth Weight	391	8.2	0.91	1992	368	7.8	0.84	1993	393	8.5	0.92	1994	
Readiness and Early School Performance													
1st Grade "Not Ready"	1,260	26.6	1.00	1990-91	1,236	26.7	0.96	1992-93	1,345	27.2	0.97	1994-95	
1st Grade Failures	633	13.7	1.52	1991-92	497	12.1	1.25	1992-93	403	8.7	1.28	1994-95	
Failures Grades 1-3 (approx. %)	884	19.8	1.40	1991-92	637	15.9	1.11	1992-93	599	13.1	1.16	1994-95	
Overage for Grade 3	1,190	29.9	1.15	1991-92	965	24.5	1.20	1993-94	825	20.2	1.25	1995-96	
School Achievement													
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	653	16.5	0.85	1991-92	690	18.0	0.91	1993-94	922	22.9	0.82	1995-96*	
Grade 8 BSAP - Math (Below Standards)	858	23.0	0.85	1991-92	880	24.8	0.80	1993-94	1,239	30.5	0.88	1995-96	
Grade 8 BSAP - Reading (Below Standards)	865	23.3	0.95	1991-92	878	24.8	0.86	1993-94	1,072	26.5	0.92	1995-96	
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	665	17.3	0.79	1991-92	697	18.6	0.77	1993-94	966	23.8	0.81	1995-96*	
Exit Exam (Not passing all parts on 1st attempt)	749	24.0	0.77	1991-92	859	25.4	0.78	1993-94	975	28.6	0.81	1995-96	
Adolescent Risk Behavior													
Pregnancy (Women ages 14 - 17)	391	4.4	0.94	1992	357	4.0	0.89	1993	372	4.1	0.85	1994	*
Alcohol Use (High School)	5,262	41.7	1.04	1989-90					4,877	40.4	1.08	1992-93	*
Drug Use (High School)	1,739	13.8	1.03	1989-90					1,847	15.3	1.20	1992-93	*
Binge Drinking (5 or more drinks)		16.6	1.06	1989-90					2,306	19.1	1.17	1992-93	*

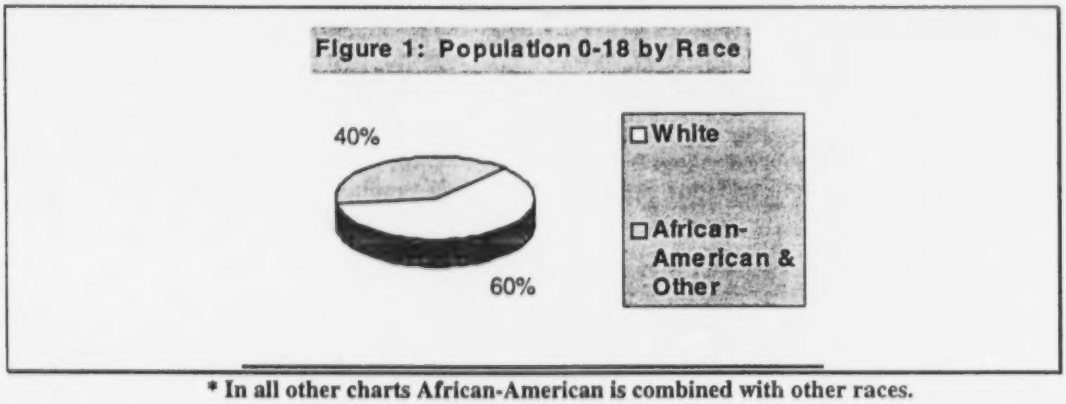
SOUTH CAROLINA kids count

1996 Report GREENWOOD

DEMOGRAPHICS

In 1994, there were 15,730 children under age 18 in the county. Of these, 9,470 were White and 6,250 were African-American and Other races. There were 16,676 children under age 18 in 1980, 17,270 in 1970, and 16,468 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 25.6% of the population in 1994, down from 37.1% in 1960, 34.8% in 1970 and 28.8% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 33.2% of all households in 1990, as compared with 44.0% of households in 1960, had children below the age of 18.

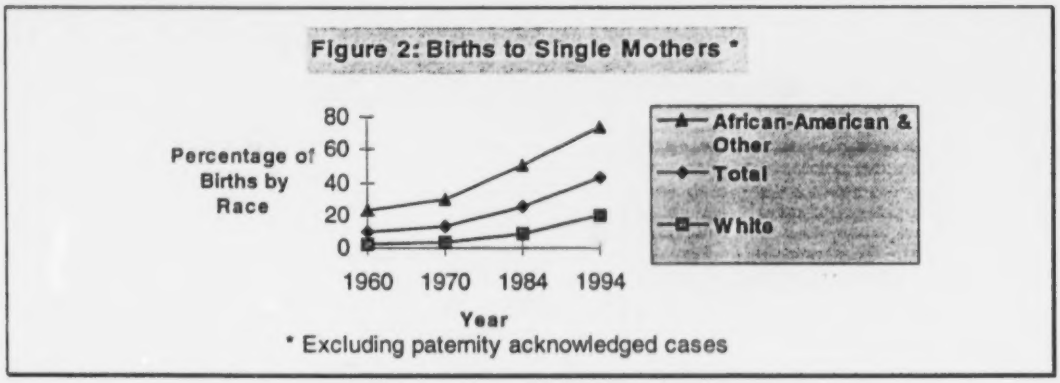
Births to Teen Mothers: In 1994, 95 babies were born to mothers younger than age 18. These babies were 10.2% of all children born in the county; 5.5% of all White babies and 16.4% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 86.3% were born to single mothers.

In 1994, 191 babies were born to mothers younger than age 20. These babies were 20.5% of all children born in the county; 14.2% of all White babies and 28.9% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 82.7% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 255 babies, 27.4% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 42.5% in 1970.

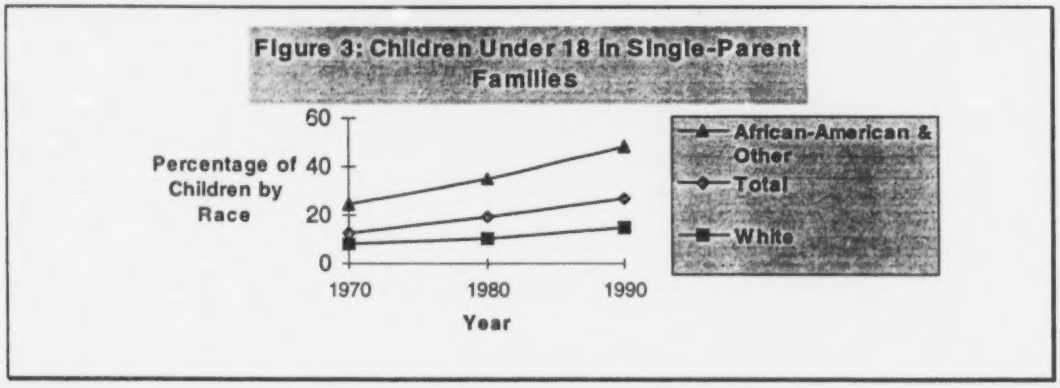
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 401 babies, 43.0% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 25.5% and in 1960 it was 9.8%. In 1994, 19.8% of White children and 73.6% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 14 babies, 1.5% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 415, constituting 44.5% of all babies, 20.6% of White babies, and 76.1% of African-American and Others.



Divorce Rate: In 1994, 624 marriage licenses were issued, while 285 divorce decrees involving 270 children were filed. In 1970 only 122 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 3,565 children lived with only one parent. This was 26.8% of all children, up from 18.9% in 1980 and 12.9% in 1970. In 1990, 14.5% of White children and 48.3% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 72.0% of mothers with children under 6 and 83.6% with children 6 - 17 were in the labor force. This has increased substantially from 48.1% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 359 children investigated as alleged child abuse and neglect victims: 25.3% for physical abuse, 12.0% for sexual abuse, 69.6% for neglect, and 34.3% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 115 children were victims of abuse and neglect: of these 44.8% were male and 55.2% were female; 50.9% were White, and 49.1% were African-American and Other. By age, 49.6% were 0 - 5, 32.2% were 6 - 12, and 18.3% were 13 - 17. They constituted 0.7% of all children age 18 or younger; 0.6% of all Whites and 0.9% of all African-Americans and Others. In the verified cases, 19.1% of abused and neglected children lived in two parent families, 42.6% in single parent families, 21.7% with extended families, and 16.5% in other circumstances.

Family Violence: In 1994, 913 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 36.0% of all assaults, which include both simple and aggravated assaults. Overall, 59.0% of all domestic assaults involve spouse abuse (constituting 21.0% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 6.1% of all children did not live with their natural parents; of these, 637 or 4.1% of children lived with relatives, 260 or 1.7% lived with non-relatives, and 54 were in institutional facilities.

Out of Home Placements: As of September 30, 1996, 38 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 15.8% 0-2, 5.3% 3-5, 26.3% 6-10, 7.9% 11-13, and 44.7% 14 and above. The foster care population is comprised of 60.5% males and 39.5% females. Regarding their future, 15.8% were under a plan for placement in adoptive homes, 47.4% for return to a parent or guardian, 2.6% for placement with a relative, 15.8% for independent living, 18.4% for permanent foster care, and 0.0% for other circumstances.

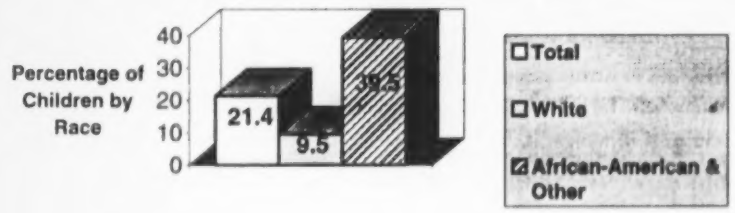
Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.9 adults for every person below age 18. This was up substantially from 1960, when there were only 1.69 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 3,270 children and youth under the age of 18 lived in families with incomes below poverty. Over 21.4% of all children and youth lived below poverty: 9.5% of Whites and 39.5% of African-Americans and others.

Figure 4: Children Living in Poverty



Poverty has always been a serious problem. While the rate among children under age 18 was 21.4% in 1989, it was 17.4% in 1979 and 16.2% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 22.5% of children 0 - 5 and 20.9% of children 6 - 17 lived in poverty; 20.1% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 51.0% of children in single-parent families lived in poverty, but only 8.7% of children in married-couple families were poor. Children in single-parent families made up 69.7% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 4,242 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 972 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	15,263	3,270	4,242	5,019	5,783	6,165	6,936
Percent		21.4%	27.8%	32.9%	37.9%	40.4%	45.4%
White	9,179	868	1,208	1,595	2,081	2,348	2,756
Percent		9.5%	13.2%	17.4%	22.7%	25.6%	30.0%
African-American and Other	6,084	2,402	3,034	3,424	3,702	3,817	4,180
Percent		39.5%	49.9%	56.3%	60.8%	62.7%	68.7%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 11.9% of households did not have a car; 6.9% of Whites and 25.1% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 10.9% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 27.0% of households had no phone.

Income: The mean income of families with children in 1989 was $35,065; in 1979, it had been $33,885, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 5.8%.

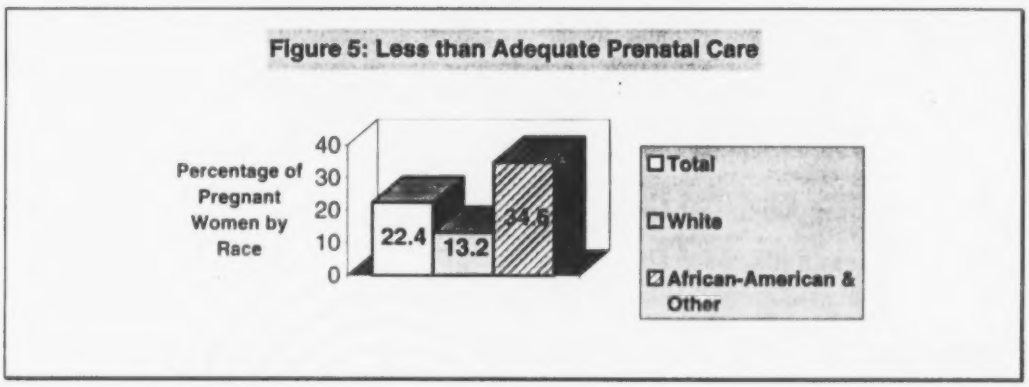
The mean income of single-parent families with children was $15,708 in 1989, as compared with $42,432 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 744 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 37.9% had child support court orders. The average monthly payment of child support was $148.64, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 177 parents in non-AFDC families were obligated to pay a monthly average of $197.81. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 159 or 17.1% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 209 or 22.4% of pregnant women received less than adequate prenatal care: 70 or 13.2% of Whites and 139 or 34.6% of African-Americans and Others. In that same year, 9 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 88 or 9.4% of all babies in the county were born with low birthweight. Over 14.9% of African-American babies and 5.3% of White babies were born with low birthweight. During 1992-94, approximately 41 or 1.5% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 41.8%. For Whites, the rate decreased by 49.4%, while for African-Americans and Others, the rate decreased by 35.4%. Over the three-year period 1992-94, 8 White and 15 African-American and Other infants died before age one. By comparison, 14 White and 22 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 3 White and 9 African-American and Other children ages 1-14 died in the county. During 1982-84, 9 White and 7 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 64.4% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 10.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 631 to 947 youth ages 13-19 in the county were infected with a STD. In the county, there were 7 reported cases of children under age 15 and 116 youth ages 15 - 19 infected with gonorrhea; 3 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 16.2% first smoked by age 11, 34.8% by age 13, and 49.3% by age 15. In a typical month, 15.5% of 7th and 8th graders and 27.9% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 33.4% of White 7th to 12th graders used cigarettes, in comparison with 6.3% African-Americans. A smaller but significant group of high school students (8.8%) used smokeless tobacco monthly; it was used primarily by White males (24.9%) compared with 0.8% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 1,573 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 724 students in grades 1-12 with learning disabilities and 303 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 1,048 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 2,328 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 15 nurses; 6 are currently available.

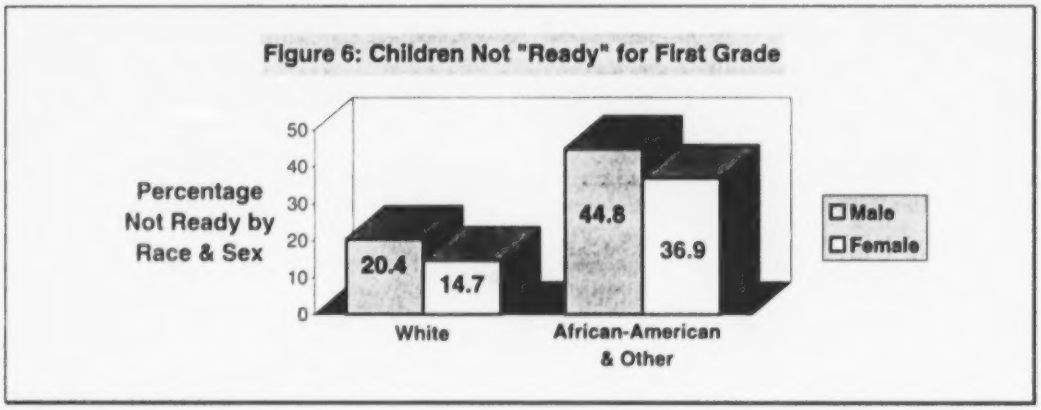
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 30.2% for Whites and 27.8% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

305 children not ready	28.6% children not ready

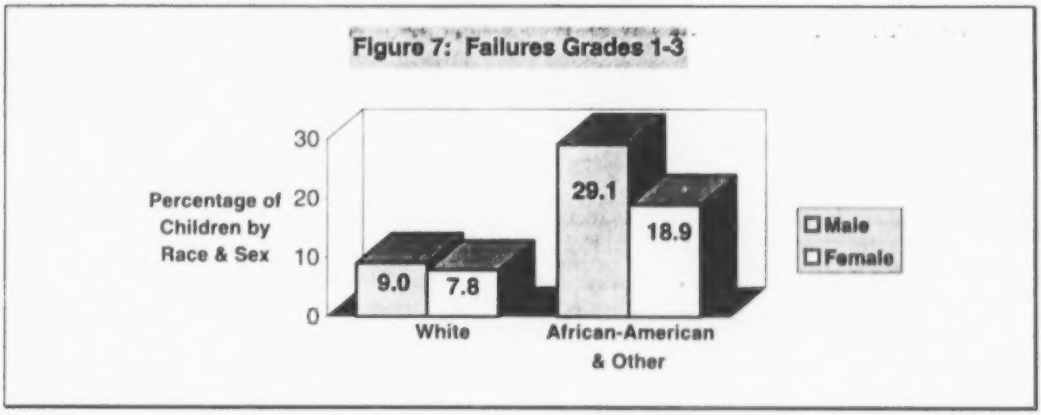


1st Grade Failures in 1995:

115 children failing	11.4% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

149 children failing	15.3% children failing



Overage for Grade 3 in 1996:

150 children overage	19.1% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 282 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 16.5% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 28.6% assessed not ready for the 1st grade, 19.1% overage in grade 3, and 16.5% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

SCHOOL ACHIEVEMENT

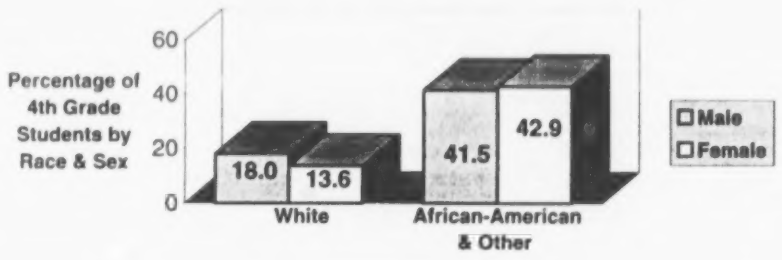
By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 303 speech and language impaired, 724 learning disabled, 31 emotionally disabled, 318 mentally impaired, and 37 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 13.7% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

208 children at or below 25th percentile	25.9% children at or below 25th percentile

Figure 8: Grade 4 Metropolitan at or Below 25th Percentile



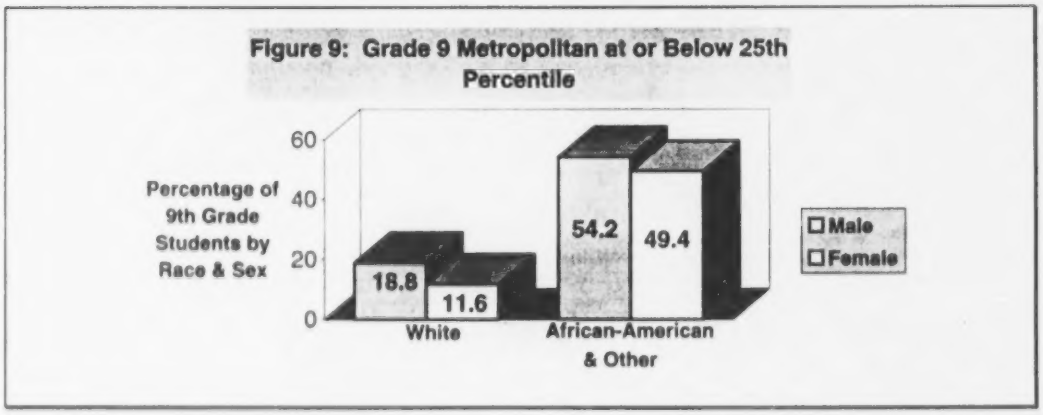
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	308	36.4	280	33.1
White Males	51	21.3	60	25.0
White Females	54	22.0	37	15.0
African-American & Other Males	98	59.8	97	59.1
African-American & Other Females	105	53.6	86	43.9

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

245 students at or below 25th percentile

29.4% students at or below 25th percentile

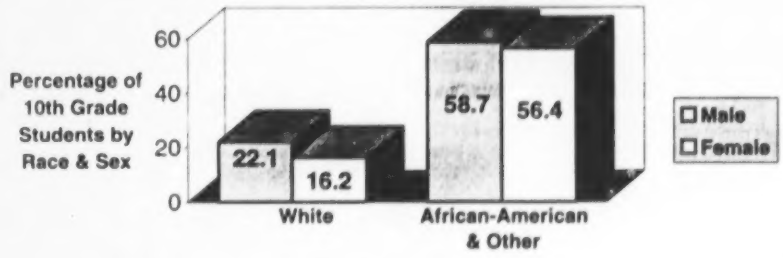


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

251 students not passing all parts

33.2% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



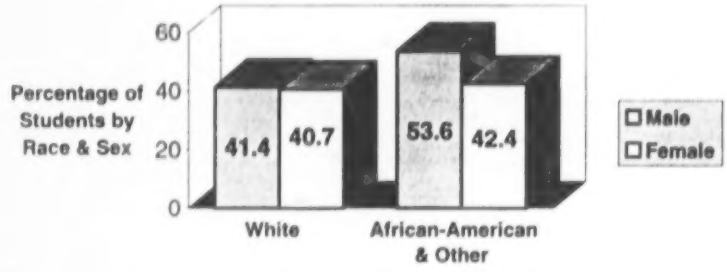
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 60.7% to 36.2% in math and from 48.4% to 24.9% in reading. During the 1990s the trend altered, with 36.4% not meeting 8th grade math standards in 1996 and 33.1% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 26.8% in 1983 on the CTBS, 24.7% in 1990 on the Stanford, and 25.8% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 33.2% in 1990 and 29.0% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

1,535 students drop out

43.7% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 35.0% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 30.5% during 1985-89, and 35.1% during 1990-94. During the 1995-96 period, 94.1% of all who did graduate received the State High School Diploma, while 3.7% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 2.3% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 37 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 93 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 24.3% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 25.9% to 43.7%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 250 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 6.4% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

5.4%	White Males	7.6%	African-American & Other Males
6.0%	White Females	7.7%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 122 girls between the ages of 14 and 17 became pregnant in 1993 and 119 in 1994. In 1994, this represented 6.4% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 3.6% for Whites and 11.1% for African-Americans and others. Of all pregnancies to 14-17 year olds, 79.0% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 12.0%.

Alcohol Use: In 1992-93, 23.5% of 7th and 8th graders and 44.1% of high schoolers said they had used alcohol in the past month. Of White males, 41.0% had used it in the past month, compared with 38.1% of African-American males; likewise, 34.4% of White females said they had used alcohol, compared with 28.2% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 16.4% had used alcohol by age 11 or younger, 38.2% by age 13, and 65.2% by age 15.

During the previous year, 31.1% of 7th and 8th graders and 45.2% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 35.0% said they had driven after drinking, and 13.1% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 58.9% of eighth graders and 92.4% of seniors felt that beer was easy to get; 49.9% of eighth graders and 51.8% of seniors felt there was not a great risk in using it regularly.

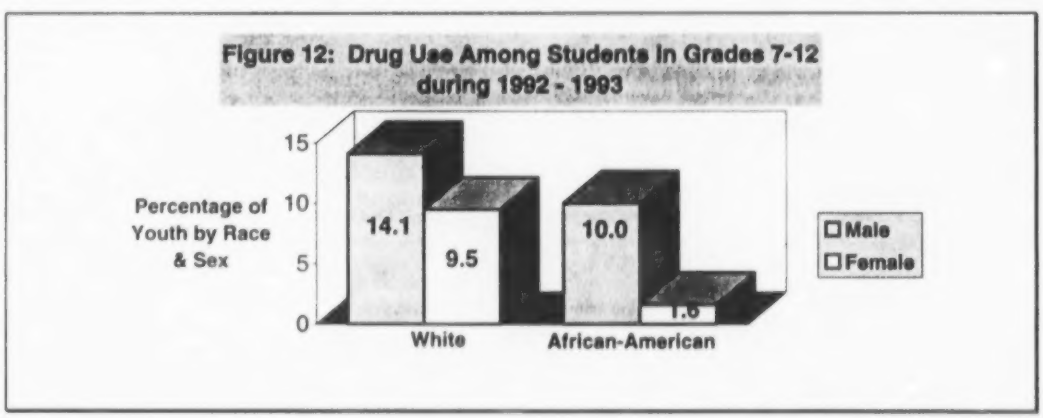
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 33.9% of all high school students in 1992-93 responded 3 or more drinks at a time; 21.0% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 2.9% of 7th and 8th graders and 13.8% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (14.1%) and White females (9.5%); use among African-American males was 10.0%; African-American females, 1.6%. Some young people first used drugs at an early age: among students 15 and older, 2.8% experienced their first use by age 11 or sooner; 9.2% had used a drug by age 13, and 19.0% by age 15.

Of seniors who had initiated use of marijuana, 9.4% had started use at home, 54.9% at a friend's home, and 35.8% elsewhere. During the past year, 4.4% of all high school students said that they used marijuana at home, 11.5% at a friend's house, and 6.3% in a car. In the past year, 7.5% of all high school students who drive and 13.1% of seniors who drive said that they had driven after using drugs . Furthermore, 11.4% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 22.7% of 8th graders who had an opinion said it is easy to get marijuana and 17.9% said it is easy to get cocaine or crack; 79.0% of seniors who had an opinion said it is easy to get marijuana and 68.3% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 22.4% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 415 individual juvenile offenders in the county were referred to the Solicitor; of these, 16.9% were age 12 or younger, 29.9% were 13 or 14, and 53.3% were 15 or older.

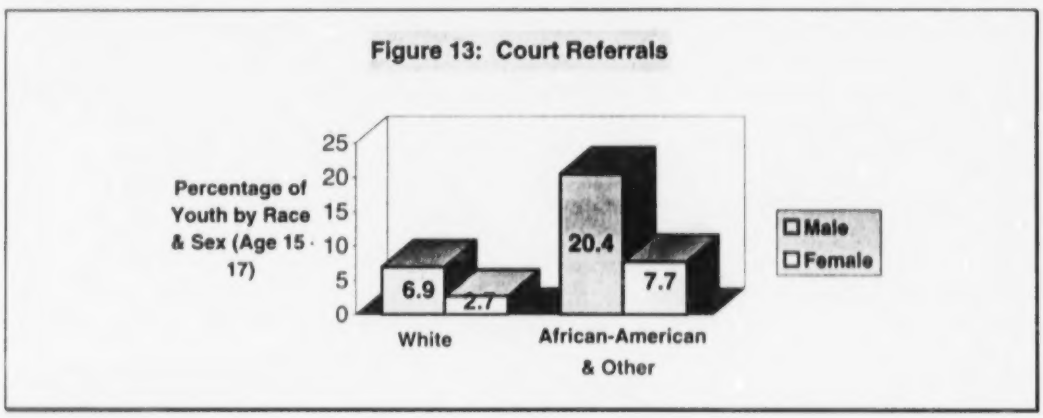
Of the referrals to the family court, 21.4% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 28 juvenile cases constituting 5.3% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 28.8% lived in families with income under $10,000, 33.4% with $10,000-$19,999 and 37.8% with $20,000 or more. Furthermore, only 22.4% of delinquents lived with both natural parents, while 55.2% lived in a single parent household and 22.4% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 49.2% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 35.9% had at least one prior referral and 17.1% had been referred to court 3 times or more.

In 1994-95, there were 34 juvenile commitments from the county to State institutions.

During 1994-95, 221 youth ages 15 to 17 were referred to the family courts. In the county, 8.0% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 19 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 8 deaths between 1990 and 1994; homicides killed 2 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 26.8% of children in single-parent families, 21.4% in poverty, 43.7% dropping out of school, 44.1% of high school students using alcohol and 22.4% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

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We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

GREENWOOD

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	95	10.2	7.3	1.40	33	1994
Births to Mothers Not Completing High School	255	27.4	21.8	1.26	34	1994
Births to Single Mothers	401	43.0	30.4	1.41	33	1994
Children in Single-Parent Families	3,565	26.8	25.1	1.07	23	1990
Parents Working	5,203	79.9	74.3	1.08	41	1990
Abuse & Neglect Victims	115	0.7	1.0	0.70	10	1995-96
Separation from Parents	951	6.1	5.1	1.20	30	1990
Economic Status						
Poor Children	3,270	21.4	21.0	1.02	18	1989
Mean Income of Families with Children	$35,065	NA	NA	0.99	14	1989
Health						
Less than Adequate Prenatal Care	209	22.4	32.0	0.70	2	1994
Low Birth Weight	88	9.4	9.2	1.02	23	1994
Not Adequately Immunized	130	10.0	18.0	0.56	15	1995
Cigarette Smokers (High School)	749	27.9	23.1	1.21	42	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	305	28.6	28.1	1.02	23	1994-95
1st Grade Failures	115	11.4	6.8	1.68	36	1994-95
Failures grades 1-3 (approx. %)	149	15.3	11.3	1.35	32	1994-95
Overage for Grade 3	150	19.1	16.2	1.18	32	1995-96
Special Education (ages 8 and 9)	282	16.5	15.3	1.08	29	1995-96
School Achievement						
Special Education Grades 1 - 12	1,413	13.7	13.0	1.05	26	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	208	25.9	27.9	0.93	16	1995-96
Grade 8 BSAP - Math (Below standards)	308	36.4	34.8	1.05	21	1995-96
Grade 8 BSAP - Reading (Below standards)	280	33.1	28.8	1.15	26	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	245	29.4	29.5	1.00	16	1995-96
Exit Exam (Not passing all parts on 1st attempt)	251	33.2	35.3	0.94	15	1995-96
Dropout Rate	1,535	43.7	27.3	1.60	45	1992-95
25-34 Year olds with no HS Degree or GED	2,188	24.3	19.1	1.27	24	1990
Adolescent Risk Behavior						
Not in School or Employed	250	6.4	9.6	0.67	4	1990
Pregnancy (Ages 14 - 17)	119	6.4	4.8	1.33	37	1994
Alcohol Use (High School)	1,185	44.1	37.4	1.18	46	1992-93
Drug Use (High School)	371	13.8	12.8	1.08	36	1992-93
Binge Drinking (5 or more drinks)	564	21.0	16.3	1.29	46	1992-93
Delinquency (ages 15 - 17)	221	8.0	6.4	1.25	37	1994-95

* 1 = "best" 46 = "worst"

GREENWOOD TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	64	7.1	1.08	1992	82	9.1	1.38	1993	95	10.2	1.40	1994
Births to Mothers Not Completing High School	226	25.2	1.07	1992	240	26.6	1.19	1993	255	27.4	1.26	1994
Births to Single Mothers	326	36.3	1.20	1992	362	40.2	1.33	1993	401	43.0	1.41	1994
Children in Single-Parent Families		12.9	0.89	1970		18.9	1.00	1980	3,565	26.8	1.07	1990
Economic Status												
Poor Children		16.2	0.56	1969		17.4	0.82	1979	3,270	21.4	1.02	1989
Mean Income of Families with Children					33,885	N/A	0.98	1979	35,065	N/A	1.01	1989
Health												
Less than Adequate Prenatal Care	196	21.9	0.55	1992	202	22.4	0.63	1993	209	22.4	0.70	1994
Low Birth Weight	76	8.5	0.94	1992	117	13.0	1.40	1993	88	9.4	1.02	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	257	26.9	1.01	1990-91	286	30.4	1.09	1992-93	305	28.6	1.02	1994-95
1st Grade Failures	132	13.7	1.52	1991-92	131	15.3	1.58	1992-93	115	11.4	1.68	1994-95
Failures Grades 1-3 (approx. %)	181	19.4	1.38	1991-92	176	21.0	1.47	1992-93	149	15.3	1.35	1994-95
Overage for Grade 3	253	30.7	1.19	1991-92	188	23.2	1.13	1993-94	150	19.1	1.18	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	110	13.4	0.69	1991-92	126	16.1	0.81	1993-94	208	25.9	0.93	1995-96*
Grade 8 BSAP - Math (Below Standards)	238	29.6	1.10	1991-92	255	28.0	0.91	1993-94	308	36.4	1.05	1995-96
Grade 8 BSAP - Reading (Below Standards)	225	27.8	1.14	1991-92	259	28.4	0.99	1993-94	280	33.1	1.15	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	186	22.0	1.00	1991-92	161	20.8	0.86	1993-94	245	29.4	1.00	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	252	34.1	1.10	1991-92	247	34.6	1.06	1993-94	251	33.2	0.94	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	92	5.1	1.09	1992	122	6.7	1.49	1993	119	6.4	1.33	1994
Alcohol Use (High School)	1,132	44.4	1.10	1989-90					1,185	44.1	1.18	1992-93
Drug Use (High School)	425	16.7	1.25	1989-90					371	13.8	1.08	1992-93
Binge Drinking (5 or more drinks)		21.9	1.40	1989-90					564	21.0	1.29	1992-93

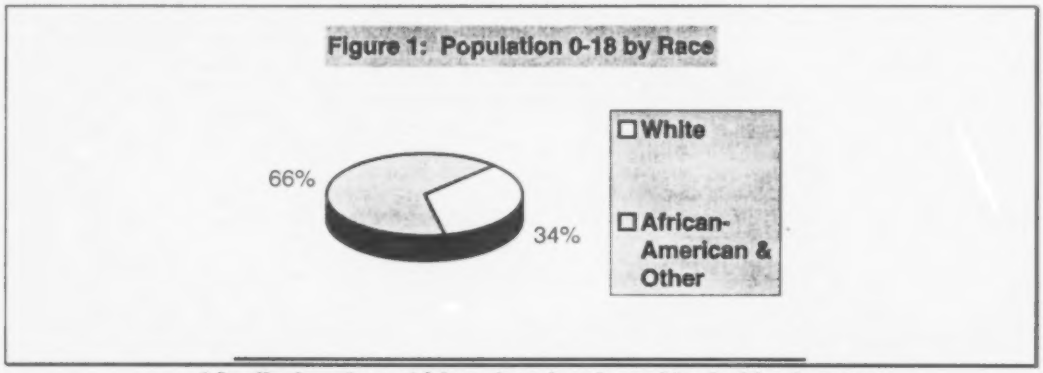
SOUTH CAROLINA kids count

1996 Report HAMPTON

DEMOGRAPHICS

In 1994, there were 6,000 children under age 18 in the county. Of these, 2,050 were White and 3,960 were African-American and Other races. There were 6,120 children under age 18 in 1980, 6,229 in 1970, and 8,009 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 31.6% of the population in 1994, down from 46.0% in 1960, 39.2% in 1970 and 33.7% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 38.1% of all households in 1990, as compared with 47.0% of households in 1960, had children below the age of 18.

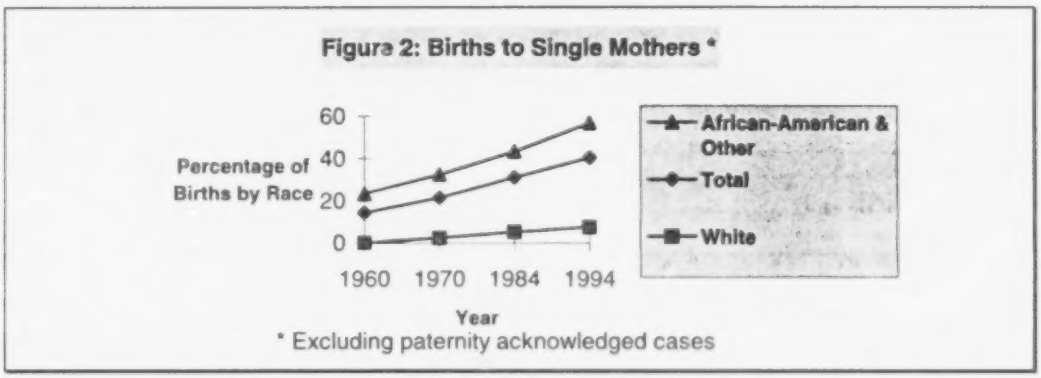
Births to Teen Mothers: In 1994, 26 babies were born to mothers younger than age 18. These babies were 9.3% of all children born in the county; 5.4% of all White babies and 11.2% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 80.8% were born to single mothers.

In 1994, 62 babies were born to mothers younger than age 20. These babies were 22.1% of all children born in the county; 11.8% of all White babies and 27.3% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 72.6% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 76 babies, 27.1% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 55.3% in 1970.

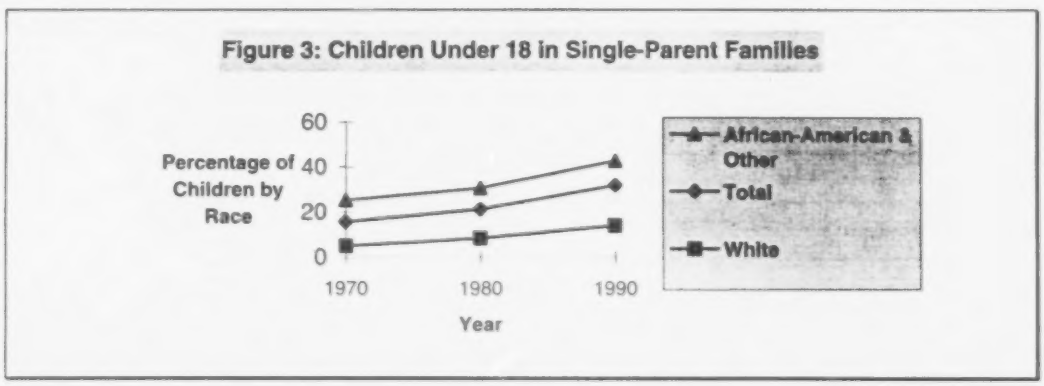
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 113 babies, 40.4% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 31.0% and in 1960 it was 14.4%. In 1994, 7.5% of White children and 56.7% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 13 babies, 4.6% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 126, constituting 45.0% of all babies, 14.0% of White babies, and 60.4% of African-American and Others.



Divorce Rate: In 1994, 155 marriage licenses were issued, while 53 divorce decrees involving 47 children were filed. In 1970 only 27 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 1,567 children lived with only one parent. This was 31.8% of all children, up from 21.1% in 1980 and 15.6% in 1970. In 1990, 13.9% of White children and 42.7% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 63.3% of mothers with children under 6 and 76.1% with children 6 - 17 were in the labor force. This has increased substantially from 37.4% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 291 children investigated as alleged child abuse and neglect victims: 31.3% for physical abuse, 5.5% for sexual abuse, 62.5% for neglect, and 29.9% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 51 children were victims of abuse and neglect: of these 41.2% were male and 58.8% were female; 31.4% were White, and 68.6% were African-American and Other. By age, 37.3% were 0 - 5, 41.2% were 6 - 12, and 21.6% were 13 - 17. They constituted 0.8% of all children age 18 or younger; 0.8% of all Whites and 0.9% of all African-Americans and Others. In the verified cases, 19.6% of abused and neglected children lived in two parent families, 72.5% in single parent families, 2.0% with extended families, and 5.9% in other circumstances.

Family Violence: In 1994, 64 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 45.0% of all assaults, which include both simple and aggravated assaults. Overall, 60.9% of all domestic assaults involve spouse abuse (constituting 27.7% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 6.8% of all children did not live with their natural parents; of these, 296 or 5.1% of children lived with relatives, 97 or 1.7% lived with non-relatives, and 0 were in institutional facilities.

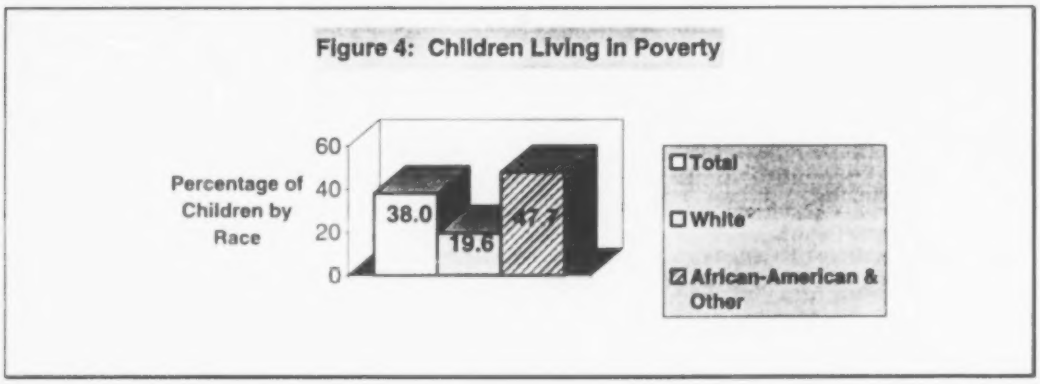
Out of Home Placements: As of September 30, 1996, 28 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 10.7% 0-2, 25.0% 3-5, 25.0% 6-10, 14.3% 11-13, and 25.0% 14 and above. The foster care population is comprised of 53.6% males and 46.4% females. Regarding their future, 46.4% were under a plan for placement in adoptive homes, 39.3% for return to a parent or guardian, 14.3% for placement with a relative, 0.0% for independent living, 0.0% for permanent foster care, and 0.0% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.17 adults for every person below age 18. This was up substantially from 1960, when there were only 1.18 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 2,166 children and youth under the age of 18 lived in families with incomes below poverty. Over 38.0% of all children and youth lived below poverty: 19.6% of Whites and 47.7% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 38.0% in 1989, it was 36.2% in 1979 and 42.8% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 32.8% of children 0 - 5 and 40.4% of children 6 - 17 lived in poverty; 35.0% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 70.6% of children in single-parent families lived in poverty, but only 20.2% of children in married-couple families were poor. Children in single-parent families made up 65.1% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 2,547 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 381 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	5,701	2,166	2,547	3,052	3,475	3,612	3,727
Percent		38.0%	44.7%	53.5%	61.0%	63.4%	65.4%
White	1,972	387	490	641	779	837	884
Percent		19.6%	24.8%	32.5%	39.5%	42.4%	44.8%
African-American and Other	3,729	1,779	2,057	2,411	2,696	2,775	2,843
Percent		47.7%	55.2%	64.7%	72.3%	74.4%	76.2%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 17.8% of households did not have a car; 6.0% of Whites and 30.5% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 18.0% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 36.1% of households had no phone.

Income: The mean income of families with children in 1989 was $27,786; in 1979, it had been $27,905, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 4.4%.

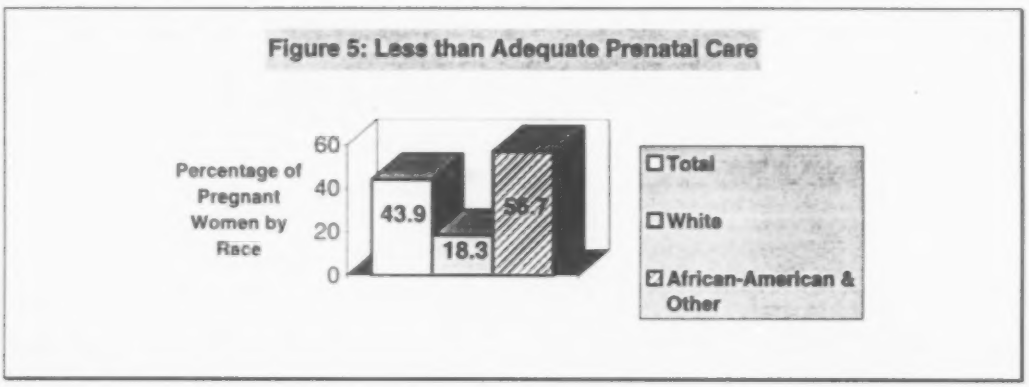
The mean income of single-parent families with children was $11,397 in 1989, as compared with $34,278 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 465 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 44.5% had child support court orders. The average monthly payment of child support was $168.32, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 157 parents in non-AFDC families were obligated to pay a monthly average of $181.63. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 94 or 33.6% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 123 or 43.9% of pregnant women received less than adequate prenatal care: 17 or 18.3% of Whites and 106 or 56.7% of African-Americans and Others. In that same year, 8 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 21 or 7.5% of all babies in the county were born with low birthweight. Over 10.2% of African-American babies and 2.2% of White babies were born with low birthweight. During 1992-94, approximately 18 or 1.9% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 38.4%. For Whites, the rate increased by 152.3%, while for African-Americans and Others, the rate decreased by 70.1%. Over the three-year period 1992-94, 7 White and 5 African-American and Other infants died before age one. By comparison, 3 White and 18 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 1 White and 2 African-American and Other children ages 1-14 died in the county. During 1982-84, 4 White and 2 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 44.3% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 16.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 223 to 335 youth ages 13-19 in the county were infected with a STD. In the county, there were no reported cases of children under age 15 and 6 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 10.6% first smoked by age 11, 24.0% by age 13, and 34.7% by age 15. In a typical month, 11.9% of 7th and 8th graders and 15.0% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 27.9% of White 7th to 12th graders used cigarettes, in comparison with 7.3% African-Americans. A smaller but significant group of high school students (4.2%) used smokeless tobacco monthly; it was used primarily by White males (21.9%) compared with 0.5% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 600 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 167 students in grades 1-12 with learning disabilities and 104 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 400 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 888 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 6 nurses; 4 are currently available.

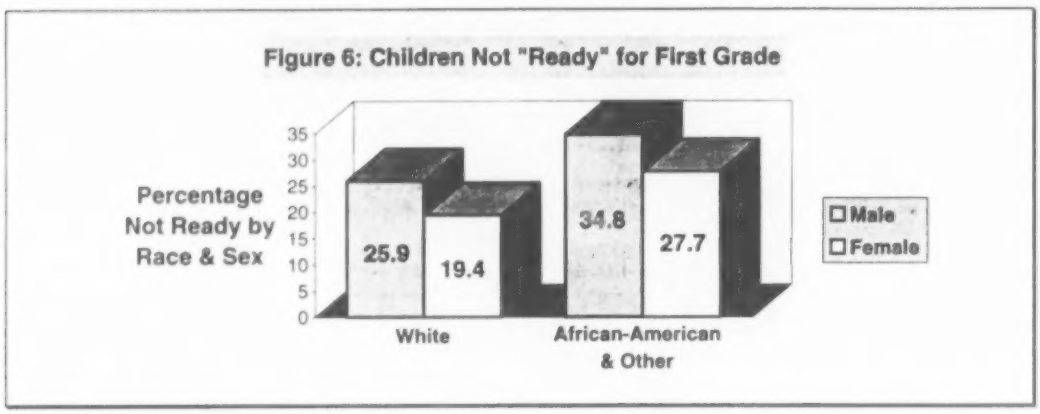
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 37.5% for Whites and 38.4% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

117 children not ready	28.6% children not ready

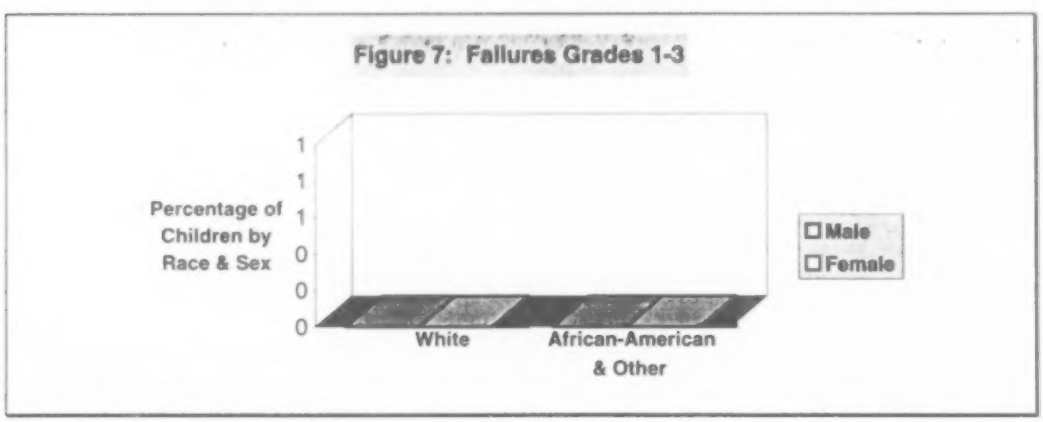


1st Grade Failures in 1995: **

NA	children failing	NA	% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995: **

NA	children failing	NA	% children failing



**** Data is not available for 1995. However, the 1995 Kids Count report found 41 children, 12.5% failed 1st Grade in 1993.**
51 children, 16.2% failed in grades 1-3 in 1993 (8.0% White males, 8.2% White females, 28.5% African American and Other males, and 9.7% African American and Other females).

Overage for Grade 3 in 1996:

45 children overage	16.8% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 73 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 11.8% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 28.6% assessed not ready for the 1st grade, 16.8% overage in grade 3, and 11.8% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

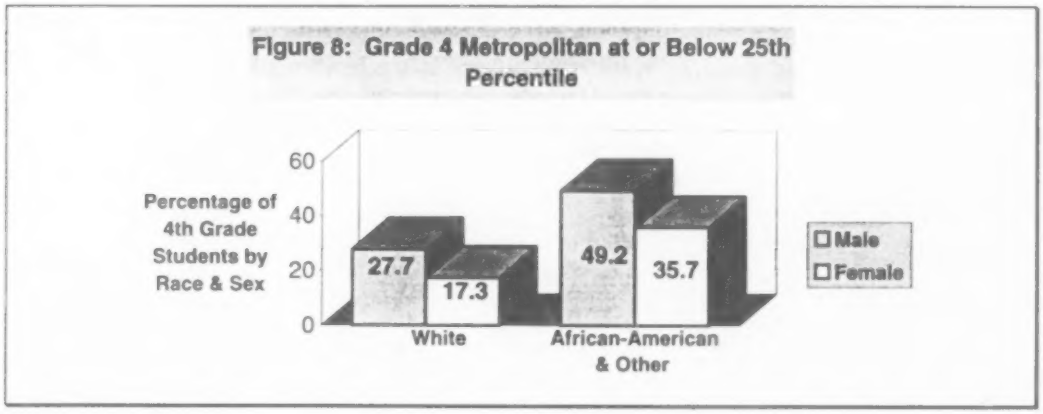
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 104 speech and language impaired, 167 learning disabled, 10 emotionally disabled, 190 mentally impaired, and 24 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 12.7% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

124 children at or below 25th percentile	36.8% children at or below 25th percentile



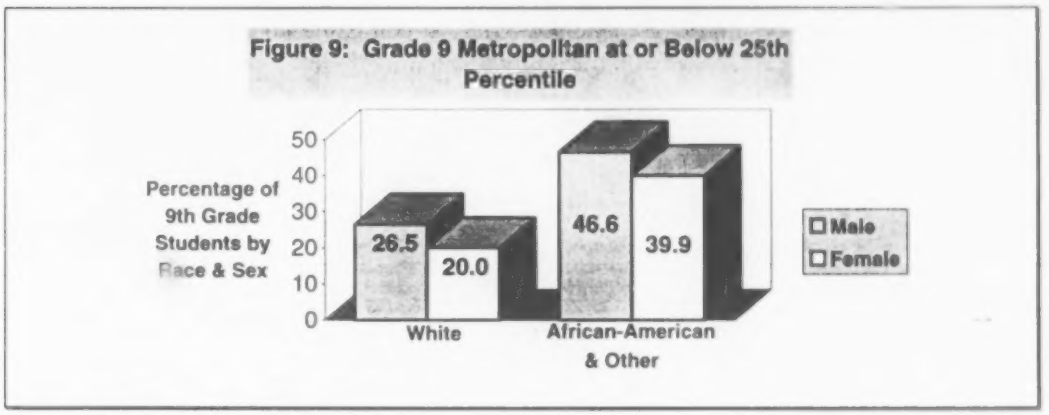
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	173	50.9	150	44.1
White Males	11	24.4	12	26.7
White Females	14	25.9	12	22.2
African-American & Other Males	74	56.5	74	56.5
African-American & Other Females	74	67.3	52	47.3

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

130 students at or below 25th percentile

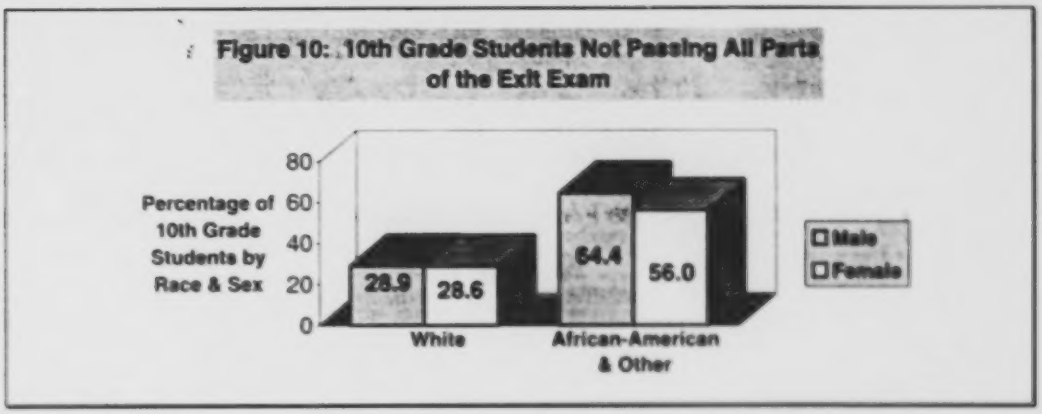
37.9% students at or below 25th percentile



Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

121 students not passing all parts

49.6% students not passing all parts

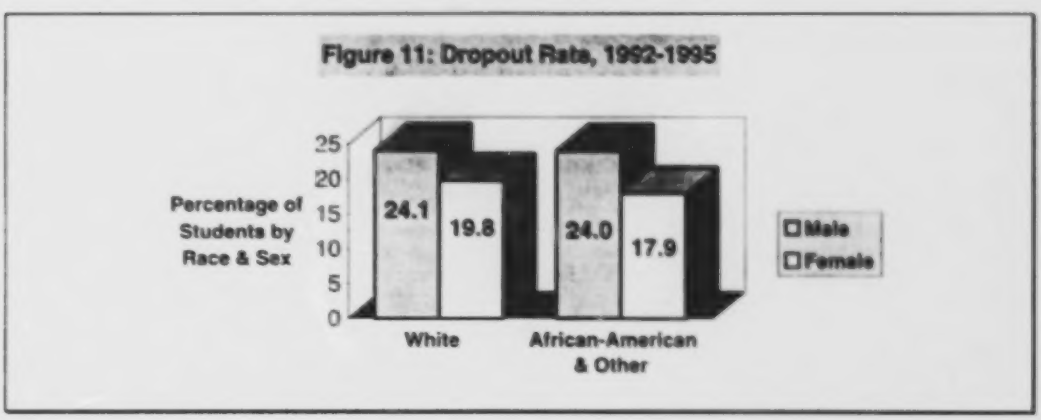


Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 69.9% to 37.5% in math and from 61.1% to 32.7% in reading. During the 1990s the trend altered, with 50.9% not meeting 8th grade math standards in 1996 and 44.1% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 40.5% in 1983 on the CTBS, 44.2% in 1990 on the Stanford, and 37.1% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 43.5% in 1990 and 47.4% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

263 students drop out

21.2% students drop out



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Dropouts: A distressing number of students drop out and fail to graduate. An average 39.7% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 26.6% during 1985-89, and 24.7% during 1990-94. During the 1995-96 period, 96.1% of all who did graduate received the State High School Diploma, while 2.2% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 1.7% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 8 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 20 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 21.9% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 21.2% to 50.9%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 114 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 9.2% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

7.1%	White Males	0.6%	African-American & Other Males
26.2%	White Females	10.0%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 28 girls between the ages of 14 and 17 became pregnant in 1993 and 37 in 1994. In 1994, this represented 5.8% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 4.3% for Whites and 6.5% for African-Americans and others. Of all pregnancies to 14-17 year olds, 67.6% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 19.8%.

Alcohol Use: In 1992-93, 23.8% of 7th and 8th graders and 36.8% of high schoolers said they had used alcohol in the past month. Of White males, 46.0% had used it in the past month, compared with 32.4% of African-American males; likewise, 44.6% of White females said they had used alcohol, compared with 20.9% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 11.8% had used alcohol by age 11 or younger, 31.4% by age 13, and 54.7% by age 15.

During the previous year, 34.0% of 7th and 8th graders and 45.2% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 27.9% said they had driven after drinking, and 8.3% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 54.3% of eighth graders and 78.8% of seniors felt that beer was easy to get; 55.1% of eighth graders and 50.6% of seniors felt there was not a great risk in using it regularly.

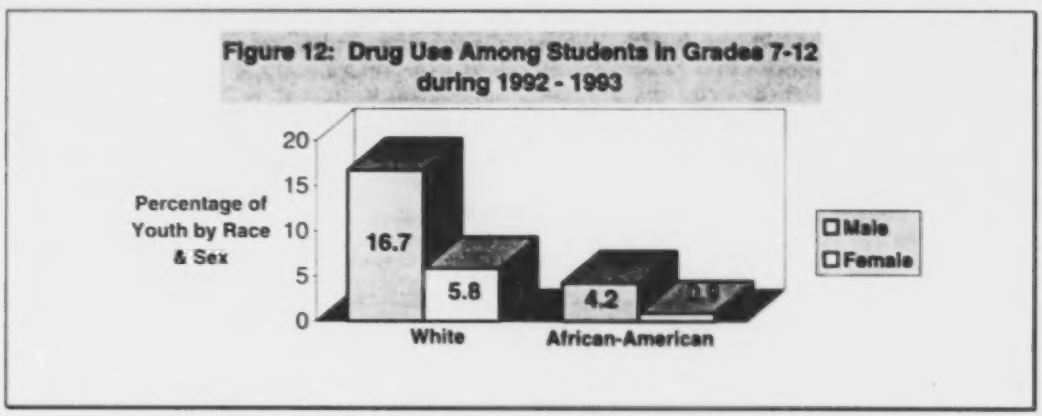
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 24.7% of all high school students in 1992-93 responded 3 or more drinks at a time; 14.0% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 2.6% of 7th and 8th graders and 6.7% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (16.7%) and White females (5.8%); use among African-American males was 4.2%; African-American females, 0.9%. Some young people first used drugs at an early age: among students 15 and older, 2.1% experienced their first use by age 11 or sooner; 4.4% had used a drug by age 13, and 9.7% by age 15.

Of seniors who had initiated use of marijuana, 11.1% had started use at home, 34.3% at a friend's home, and 54.6% elsewhere. During the past year, 1.8% of all high school students said that they used marijuana at home, 3.0% at a friend's house, and 2.6% in a car. In the past year, 3.8% of all high school students who drive and 5.0% of seniors who drive said that they had driven after using drugs . Furthermore, 3.7% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 15.7% of 8th graders who had an opinion said it is easy to get marijuana and 14.9% said it is easy to get cocaine or crack; 62.9% of seniors who had an opinion said it is easy to get marijuana and 55.4% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 10.9% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 82 individual juvenile offenders in the county were referred to the Solicitor; of these, 17.1% were age 12 or younger, 36.6% were 13 or 14, and 46.3% were 15 or older.

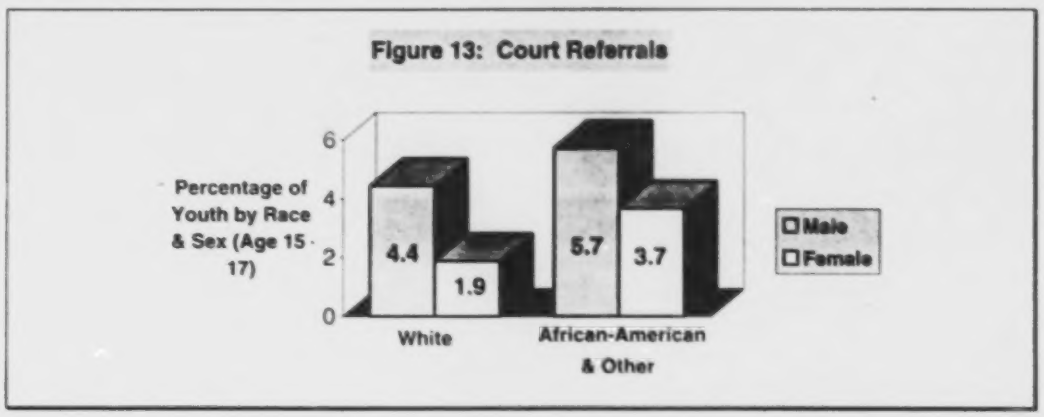
Of the referrals to the family court, 20.3% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 12 juvenile cases constituting 15.2% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 57.8% lived in families with income under $10,000, 26.6% with $10,000-$19,999 and 15.6% with $20,000 or more. Furthermore, only 15.4% of delinquents lived with both natural parents, while 49.2% lived in a single parent household and 35.4% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 56.9% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 23.2% had at least one prior referral and 11% had been referred to court 3 times or more.

In 1994-95, there were 7 juvenile commitments from the county to State institutions.

During 1994-95, 38 youth ages 15 to 17 were referred to the family courts. In the county, 4.1% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 7 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 3 deaths between 1990 and 1994; homicides killed 0 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 31.8% of children in single-parent families, 38.0% in poverty, 21.2% dropping out of school, 36.8% of high school students using alcohol and 10.9% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

Dr. A. Baron Holmes (803-734-2291) E-mail bholmes@ogc.state.sc.us
-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

HAMPTON

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	26	9.3	7.3	1.27	26	1994
Births to Mothers Not Completing High School	76	27.1	21.8	1.24	32	1994
Births to Single Mothers	113	40.4	30.4	1.33	27	1994
Children in Single-Parent Families	1,567	31.8	25.1	1.27	38	1990
Parents Working	1,369	72.2	74.3	0.97	13	1990
Abuse & Neglect Victims	51	0.8	1.0	0.80	12	1995-96
Separation from Parents	393	6.8	5.1	1.33	37	1990
Economic Status						
Poor Children	2,166	38.0	21.0	1.81	43	1989
Mean Income of Families with Children	$27,786	NA	NA	0.78	39	1989
Health						
Less than Adequate Prenatal Care	123	43.9	32.0	1.37	41	1994
Low Birth Weight	21	7.5	9.2	0.82	7	1994
Not Adequately Immunized	80	16.0	18.0	0.89	28	1995
Cigarette Smokers (High School)	150	15.0	23.1	0.65	10	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	117	28.6	28.1	1.02	23	1994-95
1st Grade Failures	NA	NA	6.8	0.00	NA	1994-95
Failures grades 1-3 (approx. %)	NA	NA	11.3	0.00	NA	1994-95
Overage for Grade 3	45	16.8	16.2	1.04	23	1995-96
Special Education (ages 8 and 9)	73	11.8	15.3	0.77	6	1995-96
School Achievement						
Special Education Grades 1 - 12	495	12.7	13.0	0.98	16	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	124	36.8	27.9	1.32	32	1995-96
Grade 8 BSAP - Math (Below standards)	173	50.9	34.8	1.46	42	1995-96
Grade 8 BSAP - Reading (Below standards)	150	44.1	28.8	1.53	40	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	130	37.9	29.5	1.28	33	1995-96
Exit Exam (Not passing all parts on 1st attempt)	121	49.6	35.3	1.41	38	1995-96
Dropout Rate	263	21.2	27.3	0.78	4	1992-95
25-34 Year olds with no HS Degree or GED	569	21.9	19.1	1.15	15	1990
Adolescent Risk Behavior						
Not in School or Employed	114	9.2	9.6	0.96	13	1990
Pregnancy (Ages 14 - 17)	37	5.8	4.8	1.21	31	1994
Alcohol Use (High School)	369	36.8	37.4	0.98	26	1992-93
Drug Use (High School)	67	6.7	12.8	0.52	12	1992-93
Binge Drinking (5 or more drinks)	140	14.0	16.3	0.86	19	1992-93
Delinquency (ages 15 - 17)	38	4.1	6.4	0.64	4	1994-95

* 1 = "best" 46 = "worst"

HAMPTON TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	35	9.9	1.50	1992	26	8.0	1.21	1993	26	9.3	1.27	1994
Births to Mothers Not Completing High School	99	28.1	1.19	1992	102	31.3	1.40	1993	76	27.1	1.24	1994
Births to Single Mothers	172	48.9	1.61	1992	155	47.5	1.57	1993	113	40.4	1.33	1994
Children in Single-Parent Families		15.6	1.08	1970		21.1	1.12	1980	1,567	31.8	1.27	1990
Economic Status												
Poor Children		42.8	1.49	1969		36.2	1.71	1979	2,166	38.0	1.81	1989
Mean Income of Families with Children					27,905	N/A	1.18	1979	27,786	N/A	1.28	1989
Health												
Less than Adequate Prenatal Care	178	50.6	1.28	1992	141	43.3	1.23	1993	123	43.9	1.37	1994
Low Birth Weight	32	9.1	1.01	1992	36	11.0	1.18	1993	21	7.5	0.82	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	77	21.3	0.80	1990-91	61	21.1	0.76	1992-93	117	28.6	1.02	1994-95
1st Grade Failures	36	10.2	1.13	1991-92	41	12.5	1.29	1992-93	NA	NA	NA	1994-95
Failures Grades 1-3 (approx. %)	51	15.4	1.09	1991-92	51	16.2	1.13	1992-93	NA	NA	NA	1994-95
Overage for Grade 3	67	24.5	0.94	1991-92	63	19.6	0.96	1993-94	45	16.8	1.04	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	89	27.0	1.40	1991-92	86	26.5	1.34	1993-94	124	36.8	1.32	1995-96*
Grade 8 BSAP - Math (Below Standards)	87	29.2	1.08	1991-92	112	37.6	1.22	1993-94	173	50.9	1.46	1995-96
Grade 8 BSAP - Reading (Below Standards)	92	30.9	1.27	1991-92	115	38.6	1.34	1993-94	150	44.1	1.53	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	79	29.5	1.35	1991-92	123	37.0	1.52	1993-94	130	37.9	1.28	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	124	44.4	1.43	1991-92	141	46.4	1.42	1993-94	121	49.6	1.41	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	45	7.3	1.55	1992	28	4.6	1.02	1993	37	5.8	1.21	1994
Alcohol Use (High School)	309	30.7	0.76	1989-90					369	36.8	0.98	1992-93
Drug Use (High School)	48	4.8	0.36	1989-90					67	6.7	0.52	1992-93
Binge Drinking (5 or more drinks)		9.2	0.59	1989-90					140	14.0	0.86	1992-93

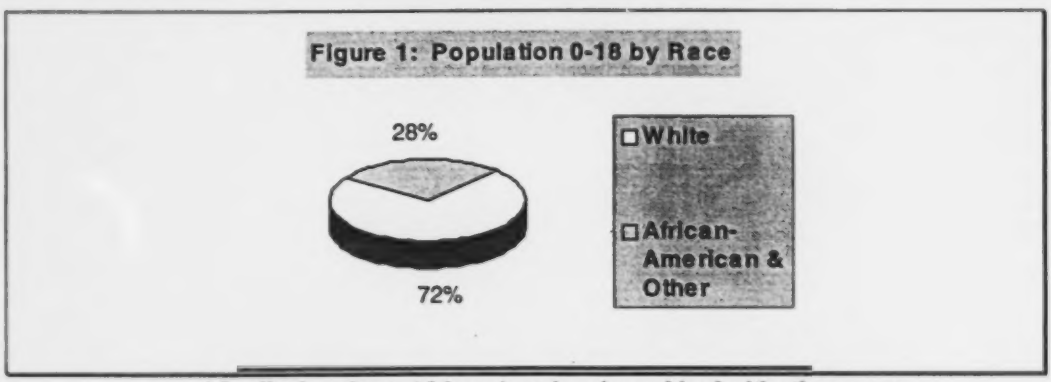
SOUTH CAROLINA kids count

1996 Report HORRY

DEMOGRAPHICS

In 1994, there were 36,320 children under age 18 in the county. Of these, 26,130 were White and 10,190 were African-American and Other races. There were 30,490 children under age 18 in 1980, 26,648 in 1970, and 30,149 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 23.8% of the population in 1994, down from 44.2% in 1960, 38.1% in 1970 and 30.1% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 31.6% of all households in 1990, as compared with 50.0% of households in 1960, had children below the age of 18.

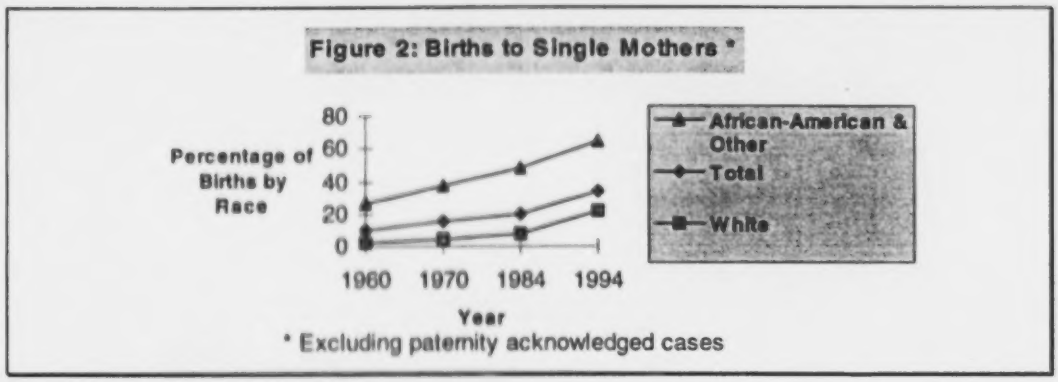
Births to Teen Mothers: In 1994, 146 babies were born to mothers younger than age 18. These babies were 7.7% of all children born in the county; 4.3% of all White babies and 16.4% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 81.5% were born to single mothers.

In 1994, 317 babies were born to mothers younger than age 20. These babies were 16.8% of all children born in the county; 11.2% of all White babies and 30.9% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 73.5% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 426 babies, 22.6% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 47.2% in 1970.

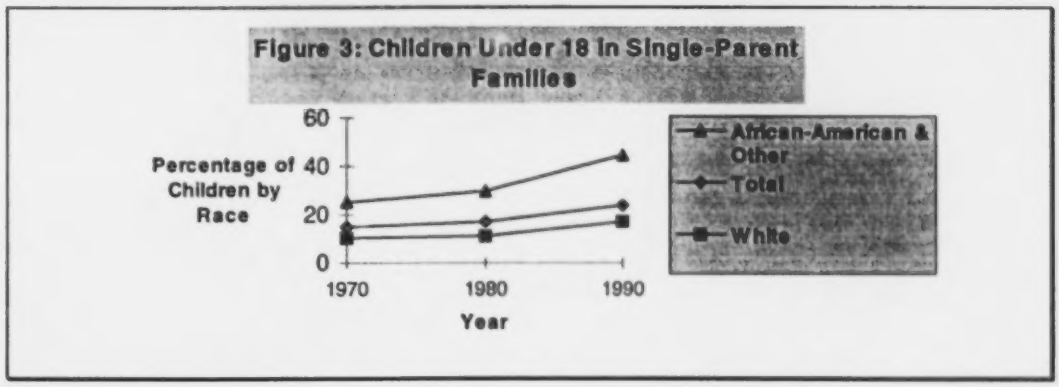
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 645 babies, 34.2% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 19.4% and in 1960 it was 10.2%. In 1994, 21.9% of White children and 65.0% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 133 babies, 7.0% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 778, constituting 41.2% of all babies, 28.5% of White babies, and 73.2% of African-American and Others.



Divorce Rate: In 1994, 3,290 marriage licenses were issued, while 534 divorce decrees involving 383 children were filed. In 1970 only 178 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 7,305 children lived with only one parent. This was 23.8% of all children, up from 16.9% in 1980 and 14.7% in 1970. In 1990, 16.8% of White children and 44.7% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 66.1% of mothers with children under 6 and 80.3% with children 6 - 17 were in the labor force. This has increased substantially from 27.2% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 2,103 children investigated as alleged child abuse and neglect victims: 31.8% for physical abuse, 13.0% for sexual abuse, 74.8% for neglect, and 27.3% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 356 children were victims of abuse and neglect: of these 44.9% were male and 55.1% were female; 64.9% were White, and 35.1% were African-American and Other. By age, 42.4% were 0 - 5, 35.4% were 6 - 12, and 22.2% were 13 - 17. They constituted 0.9% of all children age 18 or younger; 0.9% of all Whites and 1.2% of all African-Americans and Others. In the verified cases, 24.7% of abused and neglected children lived in two parent families, 30.3% in single parent families, 5.6% with extended families, and 39.3% in other circumstances.

Family Violence: In 1994, 1,343 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 26.0% of all assaults, which include both simple and aggravated assaults. Overall, 61.7% of all domestic assaults involve spouse abuse (constituting 16.2% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 3.7% of all children did not live with their natural parents; of these, 785 or 2.3% of children lived with relatives, 481 or 1.4% lived with non-relatives, and 6 were in institutional facilities.

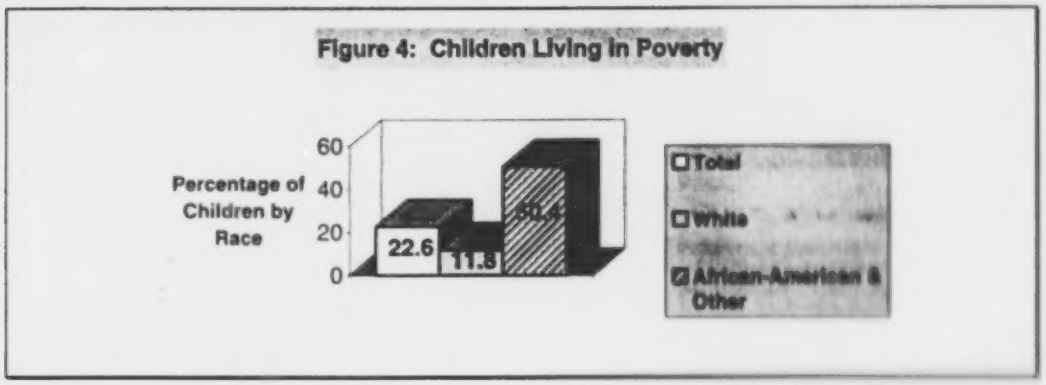
Out of Home Placements: As of September 30, 1996, 274 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 13.5% 0-2, 12.0% 3-5, 22.6% 6-10, 15.7% 11-13, and 36.1% 14 and above. The foster care population is comprised of 45.3% males and 54.7% females. Regarding their future, 40.9% were under a plan for placement in adoptive homes, 29.2% for return to a parent or guardian, 2.9% for placement with a relative, 13.9% for independent living, 12.8% for permanent foster care, and 0.4% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 3.21 adults for every person below age 18. This was up substantially from 1960, when there were only 1.26 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 7,679 children and youth under the age of 18 lived in families with incomes below poverty. Over 22.6% of all children and youth lived below poverty: 11.8% of Whites and 50.4% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 22.6% in 1989, it was 24.2% in 1979 and 37.8% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 23.9% of children 0 - 5 and 22.0% of children 6 - 17 lived in poverty; 15.9% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 51.5% of children in single-parent families lived in poverty, but only 12.0% of children in married-couple families were poor. Children in single-parent families made up 59.4% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 10,109 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 2,430 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	33,914	7,679	10,109	12,729	14,868	15,626	17,294
Percent		22.6%	29.8%	37.5%	43.8%	46.1%	51.0%
White	24,398	2,885	4,495	6,230	7,687	8,151	9,515
Percent		11.8%	18.4%	25.5%	31.5%	33.4%	39.0%
African-American and Other	9,516	4,794	5,614	6,499	7,181	7,475	7,779
Percent		50.4%	59.0%	68.3%	75.5%	78.6%	81.7%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 8.7% of households did not have a car; 5.5% of Whites and 27.7% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 8.3% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 16.8% of households had no phone.

Income: The mean income of families with children in 1989 was $34,045; in 1979, it had been $29,970, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 10.0%.

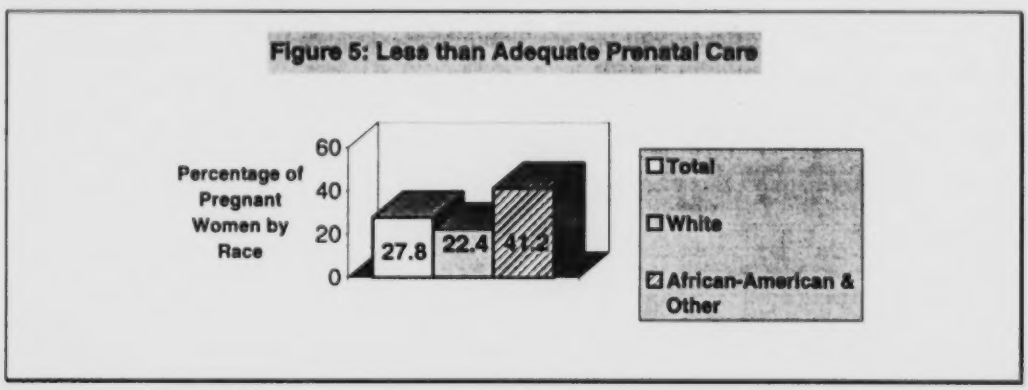
The mean income of single-parent families with children was $15,332 in 1989, as compared with $39,735 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 1,637 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 32.1% had child support court orders. The average monthly payment of child support was $139.74, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 1,309 parents in non-AFDC families were obligated to pay a monthly average of $193.98. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 419 or 22.2% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 524 or 27.8% of pregnant women received less than adequate prenatal care: 303 or 22.4% of Whites and 221 or 41.2% of African-Americans and Others. In that same year, 23 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 190 or 10.1% of all babies in the county were born with low birthweight. Over 15.8% of African-American babies and 7.8% of White babies were born with low birthweight. During 1992-94, approximately 103 or 1.7% of all babies were born with very low birthweight.

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Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 36.6%. For Whites, the rate decreased by 60.3%, while for African-Americans and Others, the rate increased by 9.3%. Over the three-year period 1992-94, 21 White and 30 African-American and Other infants died before age one. By comparison, 49 White and 26 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 19 White and 17 African-American and Other children ages 1-14 died in the county. During 1982-84, 22 White and 11 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 52.5% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 13.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 1,372 to 2,058 youth ages 13-19 in the county were infected with a STD. In the county, there were 7 reported cases of children under age 15 and 92 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 16.6% first smoked by age 11, 35.8% by age 13, and 48.4% by age 15. In a typical month, 18.1% of 7th and 8th graders and 26.0% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 28.5% of White 7th to 12th graders used cigarettes, in comparison with 8.3% African-Americans. A smaller but significant group of high school students (9.0%) used smokeless tobacco monthly; it was used primarily by White males (22.6%) compared with 1.7% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 3,632 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 1,904 students in grades 1-12 with learning disabilities and 650 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 2,393 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 5,375 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 34 nurses; 19 are currently available.

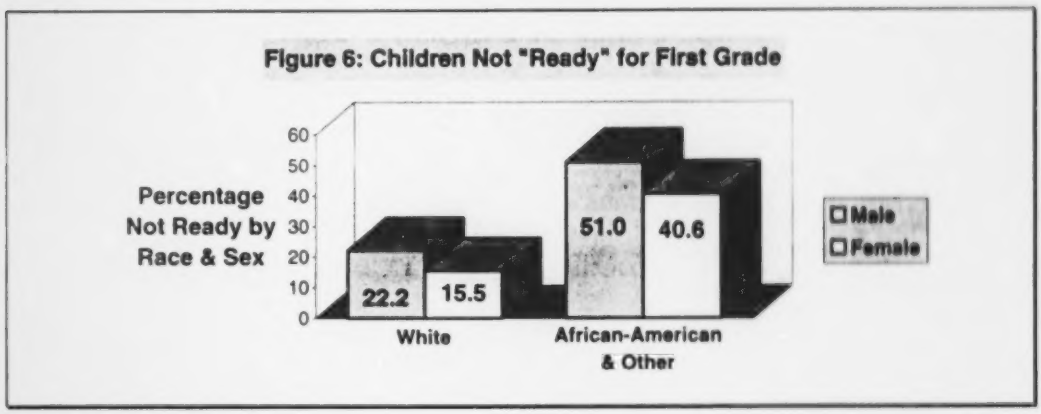
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 36.3% for Whites and 42.4% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

600 children not ready	27.7% children not ready

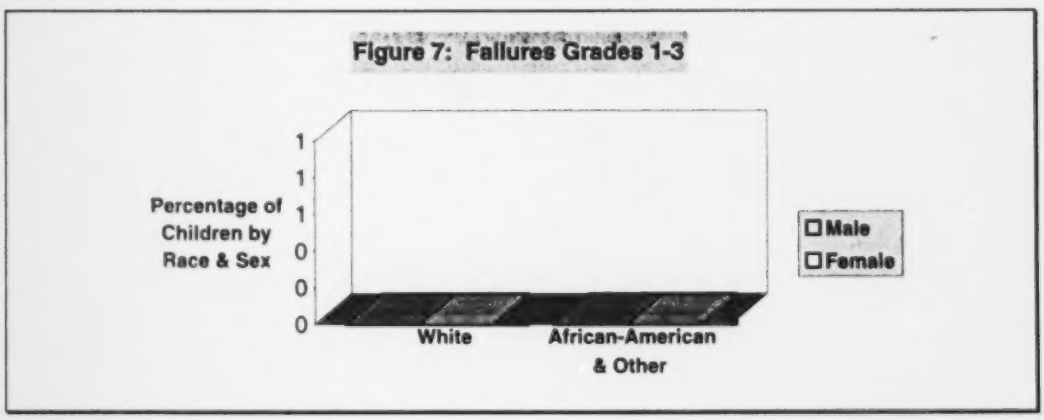


1st Grade Failures in 1995: **

NA children failing	NA % children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995: **

NA children failing	NA % children failing



**** Data is not available for 1995. However, the 1995 Kids Count report found 185 children, 10.5% failed 1st Grade in 1993.**

259 children, 15.3% failed in grades 1-3 in 1993 (12.4% White males, 9.4% White females, 27.7% African American and Other males, and 21.7% African American and Other females).

Overage for Grade 3 in 1996:

270 children overage	14.7% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 705 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 18.3% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 27.7% assessed not ready for the 1st grade, 14.7% overage in grade 3, and 18.3% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

SCHOOL ACHIEVEMENT

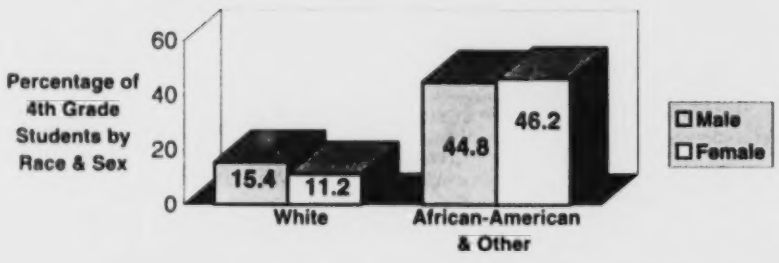
By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 650 speech and language impaired, 1,904 learning disabled, 180 emotionally disabled, 622 mentally impaired, and 189 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 15.5% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

407 children at or below 25th percentile	22.5% children at or below 25th percentile

Figure 8: Grade 4 Metropolitan at or Below 25th Percentile



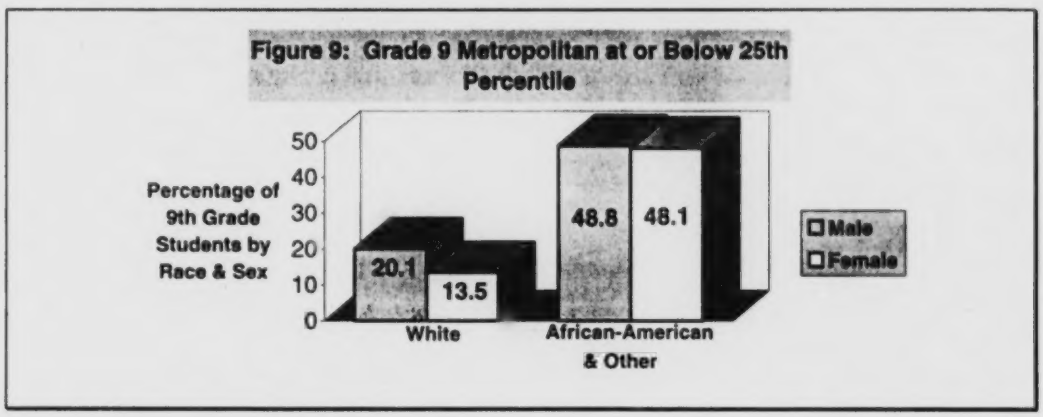
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	646	33.6	461	24.0
White Males	149	22.9	133	20.4
White Females	190	26.5	107	14.9
African-American & Other Males	146	56.8	120	46.9
African-American & Other Females	161	54.6	101	34.4

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

464 students at or below 25th percentile

25.5% students at or below 25th percentile

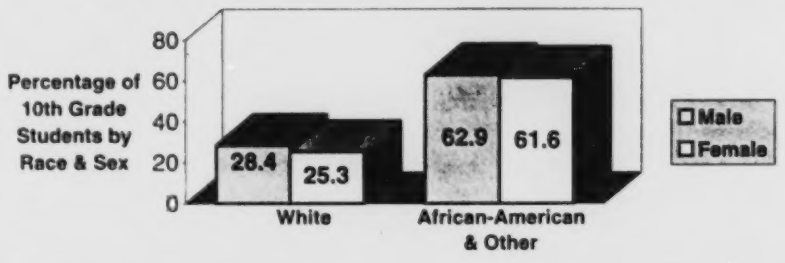


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

631 students not passing all parts

36.8% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam

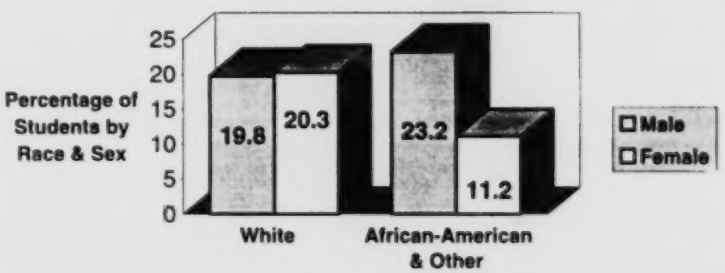


Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 59.0% to 18.4% in math and from 45.6% to 13.9% in reading. During the 1990s the trend altered, with 33.6% not meeting 8th grade math standards in 1996 and 24.0% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 24.2% in 1983 on the CTBS, 25.9% in 1990 on the Stanford, and 26.4% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 26.3% in 1990 and 27.1% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

1,396 students drop out	19.2% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 25.7% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 19.7% during 1985-89, and 20.9% during 1990-94. During the 1995-96 period, 95.6% of all who did graduate received the State High School Diploma, while 2.4% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 2.0% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 136 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 189 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 16.1% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 19.2% to 36.8%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 719 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 9.2% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

7.4%	White Males	12.8%	African-American & Other Males
9.0%	White Females	11.4%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 170 girls between the ages of 14 and 17 became pregnant in 1993 and 195 in 1994. In 1994, this represented 4.9% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 3.3% for Whites and 9.3% for African-Americans and others. Of all pregnancies to 14-17 year olds, 73.3% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 18.5%.

Alcohol Use: In 1992-93, 21.3% of 7th and 8th graders and 40.8% of high schoolers said they had used alcohol in the past month. Of White males, 37.1% had used it in the past month, compared with 30.9% of African-American males; likewise, 34.1% of White females said they had used alcohol, compared with 22.3% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 18.0% had used alcohol by age 11 or younger, 39.0% by age 13, and 61.7% by age 15.

During the previous year, 35.6% of 7th and 8th graders and 46.2% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 34.8% said they had driven after drinking, and 10.5% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 57.1% of eighth graders and 87.4% of seniors felt that beer was easy to get; 50.5% of eighth graders and 50.5% of seniors felt there was not a great risk in using it regularly.

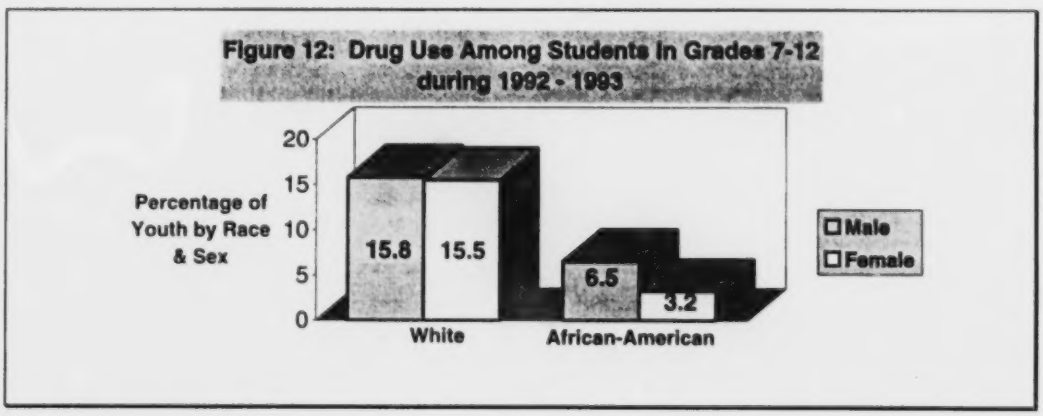
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 31.1% of all high school students in 1992-93 responded 3 or more drinks at a time; 17.7% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 6.9% of 7th and 8th graders and 16.3% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (15.8%) and White females (15.5%); use among African-American males was 6.5%; African-American females, 3.2%. Some young people first used drugs at an early age: among students 15 and older, 4.0% experienced their first use by age 11 or sooner; 11.2% had used a drug by age 13, and 22.1% by age 15.

Of seniors who had initiated use of marijuana, 7.8% had started use at home, 39.1% at a friend's home, and 53.1% elsewhere. During the past year, 5.7% of all high school students said that they used marijuana at home, 12.5% at a friend's house, and 9.7% in a car. In the past year, 9.2% of all high school students who drive and 14.4% of seniors who drive said that they had driven after using drugs . Furthermore, 10.1% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 30.8% of 8th graders who had an opinion said it is easy to get marijuana and 25.6% said it is easy to get cocaine or crack; 77.0% of seniors who had an opinion said it is easy to get marijuana and 64.3% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 26.4% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 728 individual juvenile offenders in the county were referred to the Solicitor; of these, 14.7% were age 12 or younger, 28.2% were 13 or 14, and 57.1% were 15 or older.

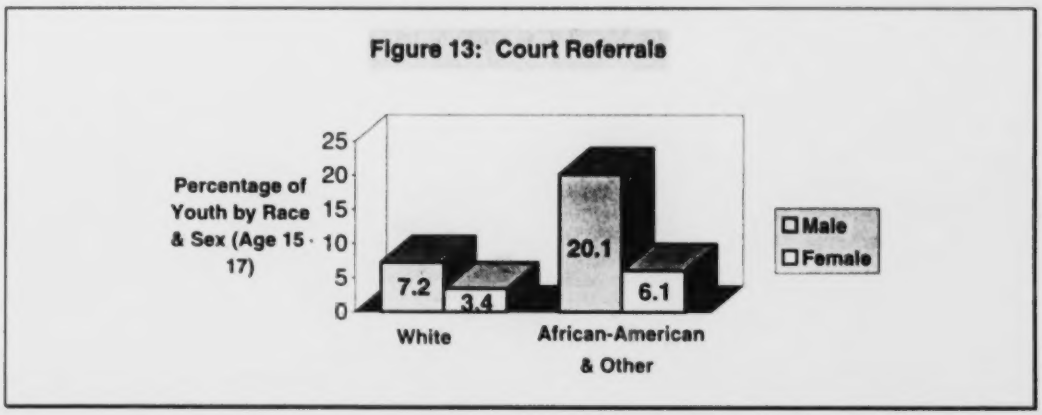
Of the referrals to the family court, 14.3% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 125 juvenile cases constituting 11.4% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 42.9% lived in families with income under $10,000, 30.1% with $10,000-$19,999 and 26.9% with $20,000 or more. Furthermore, only 23.7% of delinquents lived with both natural parents, while 49.8% lived in a single parent household and 26.6% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 30.0% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 32.0% had at least one prior referral and 10% had been referred to court 3 times or more.

In 1994-95, there were 28 juvenile commitments from the county to State institutions.

During 1994-95, 416 youth ages 15 to 17 were referred to the family courts. In the county, 7.3% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 46 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 21 deaths between 1990 and 1994; homicides killed 6 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 23.8% of children in single-parent families, 22.6% in poverty, 19.2% dropping out of school, 40.8% of high school students using alcohol and 26.4% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

Dr. A. Baron Holmes (803-734-2291) E-mail bholmes@ogc.state.sc.us
-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
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Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

HORRY

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	146	7.7	7.3	1.05	18	1994
Births to Mothers Not Completing High School	426	22.6	21.8	1.04	14	1994
Births to Single Mothers	645	34.2	30.4	1.13	21	1994
Children in Single-Parent Families	7,305	23.8	25.1	0.95	12	1990
Parents Working	11,679	75.7	74.3	1.02	26	1990
Abuse & Neglect Victims	356	0.9	1.0	0.90	16	1995-96
Separation from Parents	1,272	3.7	5.1	0.73	5	1990
Economic Status						
Poor Children	7,679	22.6	21.0	1.08	21	1989
Mean Income of Families with Children	$34,045	NA	NA	0.96	18	1989
Health						
Less than Adequate Prenatal Care	524	27.8	32.0	0.87	12	1994
Low Birth Weight	190	10.1	9.2	1.10	27	1994
Not Adequately Immunized	300	13.0	18.0	0.72	22	1995
Cigarette Smokers (High School)	1,474	26.0	23.1	1.13	38	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	600	27.7	28.1	0.99	21	1994-95
1st Grade Failures	NA	NA	6.8	0.00	NA	1994-95
Failures grades 1-3 (approx. %)	NA	NA	11.3	0.00	NA	1994-95
Overage for Grade 3	270	14.7	16.2	0.91	15	1995-96
Special Education (ages 8 and 9)	705	18.3	15.3	1.20	37	1995-96
School Achievement						
Special Education Grades 1 - 12	3,545	15.5	13.0	1.19	36	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	407	22.5	27.9	0.81	8	1995-96
Grade 8 BSAP - Math (Below standards)	646	33.6	34.8	0.97	17	1995-96
Grade 8 BSAP - Reading (Below standards)	461	24.0	28.8	0.83	10	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	464	25.5	29.5	0.86	12	1995-96
Exit Exam (Not passing all parts on 1st attempt)	631	36.8	35.3	1.04	19	1995-96
Dropout Rate	1,396	19.2	27.3	0.70	2	1992-95
25-34 Year olds with no HS Degree or GED	4,160	16.1	19.1	0.84	8	1990
Adolescent Risk Behavior						
Not in School or Employed	719	9.2	9.6	0.96	13	1990
Pregnancy (Ages 14 - 17)	195	4.9	4.8	1.02	16	1994
Alcohol Use (High School)	2,313	40.8	37.4	1.09	40	1992-93
Drug Use (High School)	924	16.3	12.8	1.27	44	1992-93
Binge Drinking (5 or more drinks)	1,004	17.7	16.3	1.09	34	1992-93
Delinquency (ages 15 - 17)	416	7.3	6.4	1.14	31	1994-95

* 1 = "best" 46 = "worst"

HORRY TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	139	6.3	0.95	1992	121	6.3	0.95	1993	146	7.7	1.05	1994
Births to Mothers Not Completing High School	484	21.9	0.93	1992	437	22.7	1.01	1993	426	22.6	1.04	1994
Births to Single Mothers	664	30.1	0.99	1992	619	32.1	1.06	1993	645	34.2	1.13	1994
Children in Single-Parent Families		14.7	1.01	1970		16.9	0.89	1980	7,305	23.8	0.95	1990
Economic Status												
Poor Children		37.8	1.32	1969		24.2	1.14	1979	7,679	22.6	1.08	1989
Mean Income of Families with Children					29,970	N/A	1.10	1979	34,045	N/A	1.04	1989
Health												
Less than Adequate Prenatal Care	983	44.5	1.13	1992	744	38.6	1.09	1993	524	27.8	0.87	1994
Low Birth Weight	183	8.3	0.92	1992	149	7.7	0.83	1993	190	10.1	1.10	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	556	26.6	1.00	1990-91	531	26.6	0.96	1992-93	600	27.7	0.99	1994-95
1st Grade Failures	158	7.8	0.87	1991-92	185	10.5	1.08	1992-93	NA	NA	NA	1994-95
Failures Grades 1-3 (approx. %)	252	13.1	0.93	1991-92	259	15.3	1.07	1992-93	NA	NA	NA	1994-95
Overage for Grade 3	499	27.9	1.08	1991-92	355	20.7	1.01	1993-94	270	14.7	0.91	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	227	13.0	0.67	1991-92	226	14.7	0.74	1993-94	407	22.5	0.81	1995-96*
Grade 8 BSAP - Math (Below Standards)	342	22.3	0.83	1991-92	486	27.1	0.88	1993-94	646	33.6	0.97	1995-96
Grade 8 BSAP - Reading (Below Standards)	294	19.1	0.78	1991-92	422	23.5	0.82	1993-94	461	24.0	0.83	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	237	13.1	0.60	1991-92	374	19.9	0.82	1993-94	464	25.5	0.86	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	442	26.8	0.86	1991-92	502	31.1	0.95	1993-94	631	36.8	1.04	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	180	4.6	0.98	1992	170	4.2	0.93	1993	195	4.9	1.02	1994
Alcohol Use (High School)	2,372	45.7	1.14	1989-90					2,313	40.8	1.09	1992-93
Drug Use (High School)	857	16.5	1.23	1989-90					924	16.3	1.27	1992-93
Binge Drinking (5 or more drinks)		19.2	1.23	1989-90					1,004	17.7	1.09	1992-93

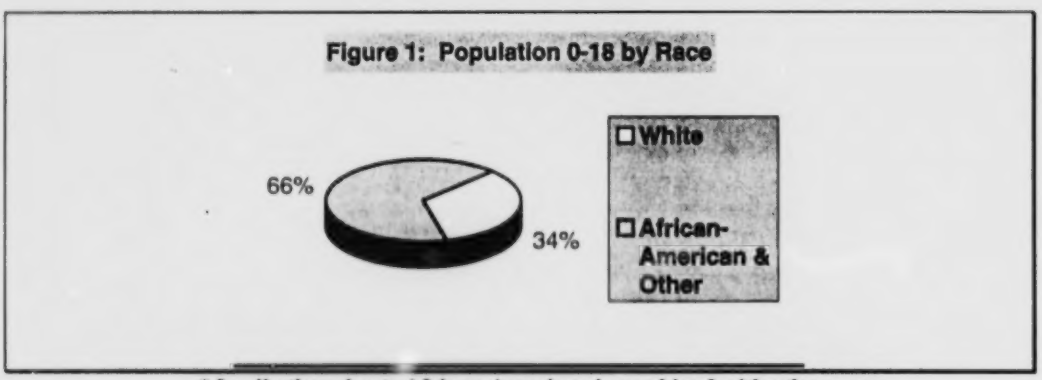
SOUTH CAROLINA kids count

1996 Report JASPER

DEMOGRAPHICS

In 1994, there were 5,050 children under age 18 in the county. Of these, 1,690 were White and 3,360 were African-American and Other races. There were 5,155 children under age 18 in 1980, 4,944 in 1970, and 5,672 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 31.4% of the population in 1994, down from 46.4% in 1960, 41.6% in 1970 and 35.5% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 38.7% of all households in 1990, as compared with 46.0% of households in 1960, had children below the age of 18.

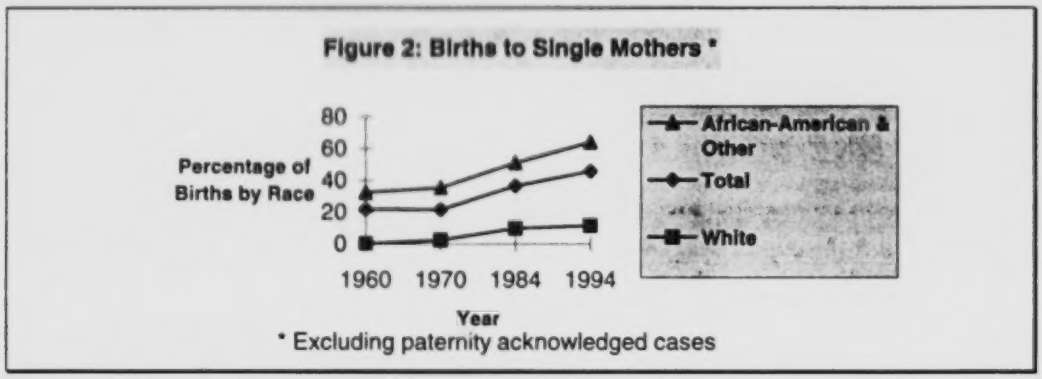
Births to Teen Mothers: In 1994, 26 babies were born to mothers younger than age 18. These babies were 9.4% of all children born in the county; 5.2% of all White babies and 11.7% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 84.6% were born to single mothers.

In 1994, 61 babies were born to mothers younger than age 20. These babies were 22.1% of all children born in the county; 14.6% of all White babies and 26.1% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 77.0% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 59 babies, 21.4% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 57.3% in 1970.

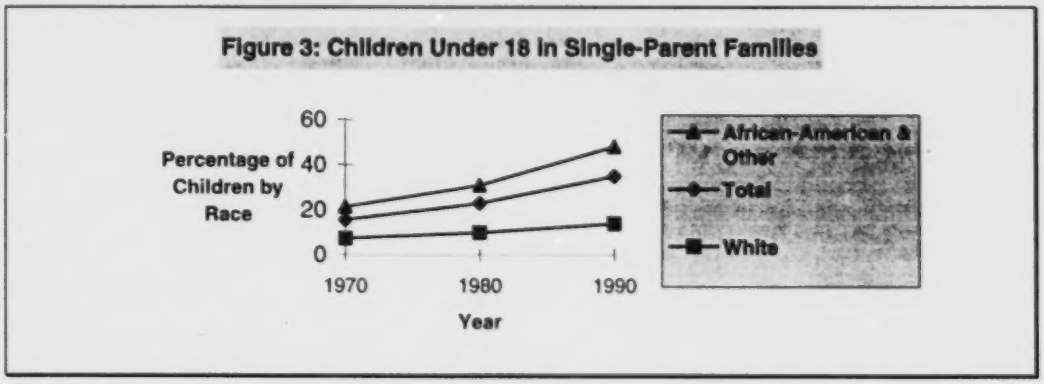
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 126 babies, 45.7% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 36.3% and in 1960 it was 21.7%. In 1994, 11.5% of White children and 63.9% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 14 babies, 5.1% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 140, constituting 50.7% of all babies, 18.8% of White babies, and 67.8% of African-American and Others.



Divorce Rate: In 1994, 1,210 marriage licenses were issued, while 47 divorce decrees involving 43 children were filed. In 1970 only 14 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 1,386 children lived with only one parent. This was 34.8% of all children, up from 22.8% in 1980 and 15.4% in 1970. In 1990, 13.8% of White children and 47.8% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 70.8% of mothers with children under 6 and 73.5% with children 6 - 17 were in the labor force. This has increased substantially from 25.8% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 141 children investigated as alleged child abuse and neglect victims: 19.9% for physical abuse, 5.0% for sexual abuse, 71.6% for neglect, and 27.0% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 23 children were victims of abuse and neglect: of these 39.1% were male and 60.9% were female; 52.2% were White, and 47.8% were African-American and Other. By age, 47.8% were 0 - 5, 34.8% were 6 - 12, and 17.4% were 13 - 17. They constituted 0.4% of all children age 18 or younger; 0.7% of all Whites and 0.3% of all African-Americans and Others. In the verified cases, 17.4% of abused and neglected children lived in two parent families, 43.5% in single parent families, 17.4% with extended families, and 21.7% in other circumstances.

Family Violence: In 1994, 204 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 35.0% of all assaults, which include both simple and aggravated assaults. Overall, 51.5% of all domestic assaults involve spouse abuse (constituting 17.9% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 8.5% of all children did not live with their natural parents; of these, 365 or 7.3% of children lived with relatives, 59 or 1.2% lived with non-relatives, and 0 were in institutional facilities.

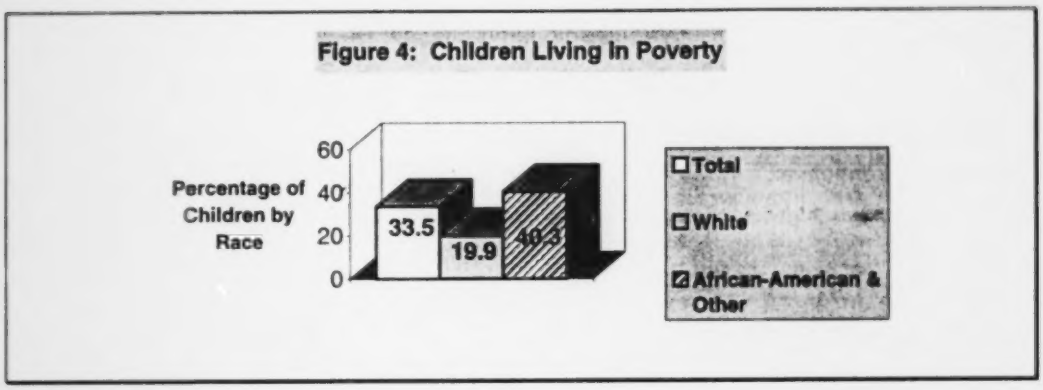
Out of Home Placements: As of September 30, 1996, 8 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 0.0% 0-2, 0.0% 3-5, 0.0% 6-10, 62.5% 11-13, and 37.5% 14 and above. The foster care population is comprised of 62.5% males and 37.5% females. Regarding their future, 0.0% were under a plan for placement in adoptive homes, 87.5% for return to a parent or guardian, 0.0% for placement with a relative, 12.5% for independent living, 0.0% for permanent foster care, and 0.0% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.19 adults for every person below age 18. This was up substantially from 1960, when there were only 1.16 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 1,654 children and youth under the age of 18 lived in families with incomes below poverty. Over 33.5% of all children and youth lived below poverty: 19.9% of Whites and 40.3% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 33.5% in 1989, it was 35.6% in 1979 and 44.9% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 33.6% of children 0 - 5 and 33.5% of children 6 - 17 lived in poverty; 33.7% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 62.9% of children in single-parent families lived in poverty, but only 15.0% of children in married-couple families were poor. Children in single-parent families made up 71.9% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 1,996 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 342 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	4,935	1,654	1,996	2,332	2,721	2,847	3,009
Percent		33.5%	40.4%	47.3%	55.1%	57.7%	61.0%
White	1,631	324	377	494	586	650	716
Percent		19.9%	23.1%	30.3%	35.9%	39.9%	43.9%
African-American and Other	3,304	1,330	1,619	1,838	2,135	2,197	2,293
Percent		40.3%	49.0%	55.6%	64.6%	66.5%	69.4%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 16.5% of households did not have a car; 7.5% of Whites and 24.3% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 17.9% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 34.3% of households had no phone.

Income: The mean income of families with children in 1989 was $26,915; in 1979, it had been $26,827, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 10.8%.

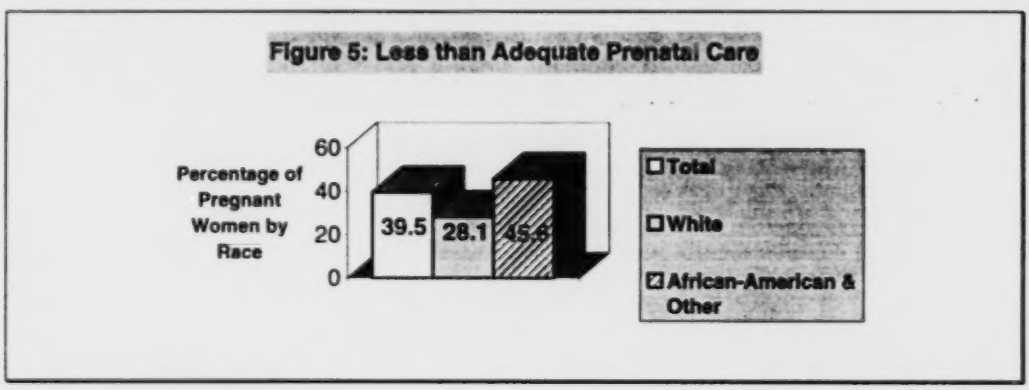
The mean income of single-parent families with children was $11,951 in 1989, as compared with $32,999 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 349 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 30.4% had child support court orders. The average monthly payment of child support was $146.53, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 85 parents in non-AFDC families were obligated to pay a monthly average of $203.57. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 71 or 25.7% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 109 or 39.5% of pregnant women received less than adequate prenatal care: 27 or 28.1% of Whites and 82 or 45.6% of African-Americans and Others. In that same year, 11 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 19 or 6.9% of all babies in the county were born with low birthweight. Over 9.4% of African-American babies and 2.1% of White babies were born with low birthweight. During 1992-94, approximately 17 or 2.0% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 31.6%. For Whites, the rate decreased by 75.0%, while for African-Americans and Others, the rate increased by 11.5%. Over the three-year period 1992-94, 2 White and 9 African-American and Other infants died before age one. By comparison, 8 White and 8 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 0 White and 1 African-American and Other children ages 1-14 died in the county. During 1982-84, 1 White and 3 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 56.9% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 11.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 175 to 263 youth ages 13-19 in the county were infected with a STD. In the county, there were no reported cases of children under age 15 and 21 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 7.6% first smoked by age 11, 17.2% by age 13, and 24.0% by age 15. In a typical month, 9.4% of 7th and 8th graders and 10.6% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 41.2% of White 7th to 12th graders used cigarettes, in comparison with 5.0% African-Americans. A smaller but significant group of high school students (3.1%) used smokeless tobacco monthly; it was used primarily by White males (29.1%) compared with 1.6% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 505 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 113 students in grades 1-12 with learning disabilities and 64 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 330 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 747 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 4 nurses; 1 are currently available.

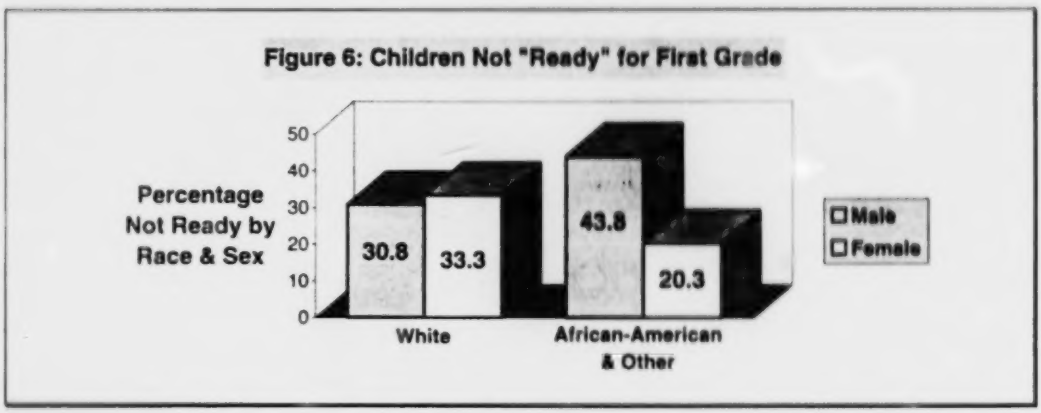
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 35.7% for Whites and 41.8% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

89 children not ready	31.3% children not ready

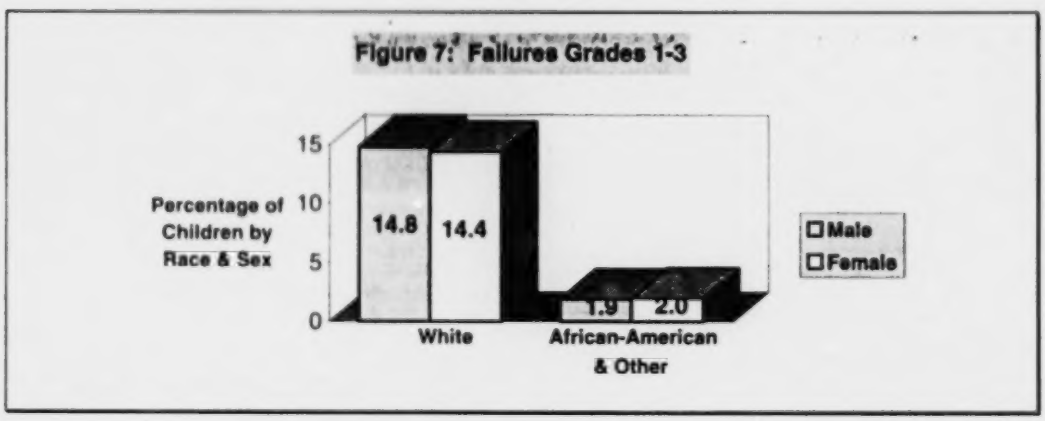


1st Grade Failures in 1995:

5 children failing	2.0% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

11 children failing	4.5% children failing



Overage for Grade 3 in 1996:

51 children overage	21.3% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 51 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 10.6% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 31.3% assessed not ready for the 1st grade, 21.3% overage in grade 3, and 10.6% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

SCHOOL ACHIEVEMENT

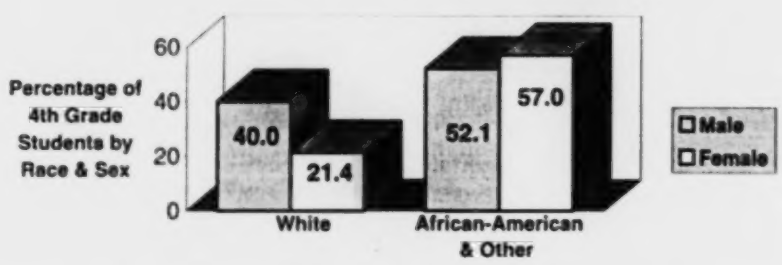
By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 64 speech and language impaired, 113 learning disabled, 13 emotionally disabled, 144 mentally impaired, and 5 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 12.9% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

107 children at or below 25th percentile	51.2% children at or below 25th percentile

Figure 8: Grade 4 Metropolitan at or Below 25th Percentile



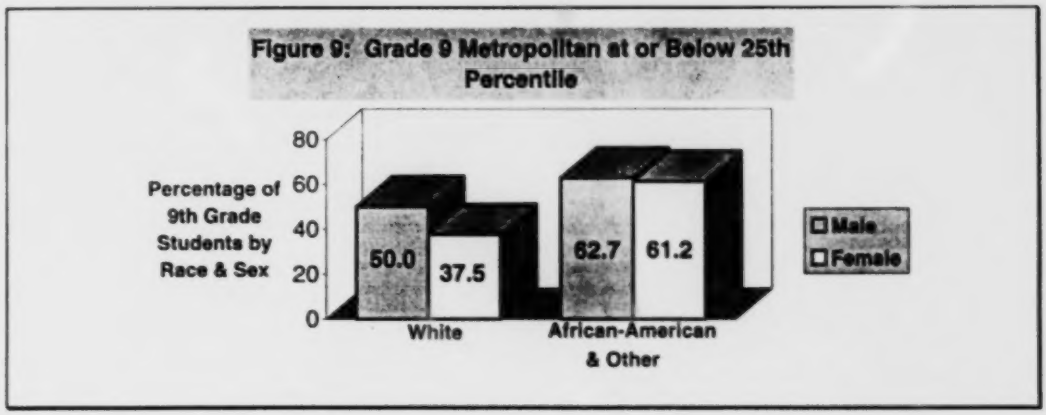
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	104	46.4	81	36.7
White Males	5	23.8	7	33.3
White Females	4	23.5	4	23.5
African-American & Other Males	44	49.4	37	42.5
African-American & Other Females	51	52.6	33	34.4

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

136 students at or below 25th percentile

59.1% students at or below 25th percentile



Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

94 students not passing all parts

58.0% students not passing all parts

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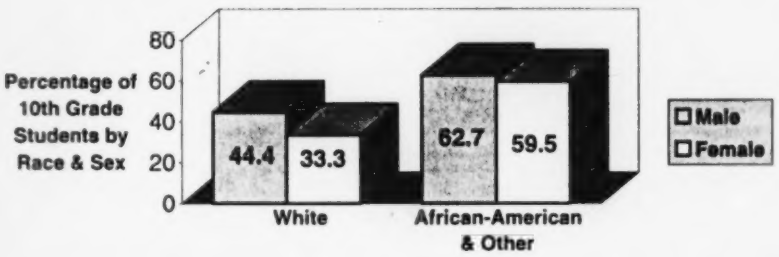
Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



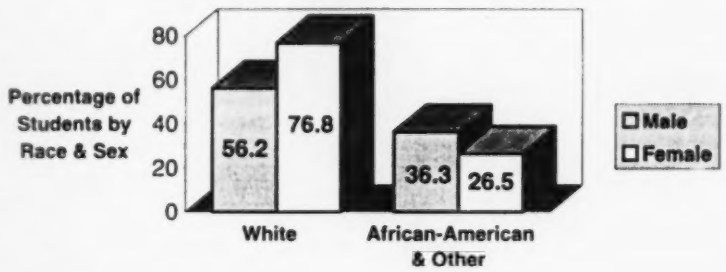
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 83.3% to 40.2% in math and from 78.8% to 37.4% in reading. During the 1990s the trend altered, with 46.4% not meeting 8th grade math standards in 1996 and 36.7% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 43.8% in 1983 on the CTBS, 51.9% in 1990 on the Stanford, and 59.5% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 43.3% in 1990 and 48.7% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

339 students drop out

38.2% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 40.8% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 39.6% during 1985-89, and 45.3% during 1990-94. During the 1995-96 period, 87.9% of all who did graduate received the State High School Diploma, while 11.0% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 1.1% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, Adult Education high school diplomas were awarded to school completers in the county. During 1995, 8 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 28.6% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 36.7% to 59.1%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 98 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 12.0% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

20.4%	White Males	5.4%	African-American & Other Males
17.0%	White Females	12.0%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 25 girls between the ages of 14 and 17 became pregnant in 1993 and 34 in 1994. In 1994, this represented 6.8% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 5.0% for Whites and 7.9% for African-Americans and others. Of all pregnancies to 14-17 year olds, 76.5% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it increased by 4.1%.

Alcohol Use: In 1992-93, 27.7% of 7th and 8th graders and 33.3% of high schoolers said they had used alcohol in the past month. Of White males, 40.9% had used it in the past month, compared with 31.7% of African-American males; likewise, 39.6% of White females said they had used alcohol, compared with 26.7% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 17.4% had used alcohol by age 11 or younger, 30.0% by age 13, and 48.1% by age 15.

During the previous year, 44.6% of 7th and 8th graders and 37.0% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 18.6% said they had driven after drinking, and 12.8% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 60.1% of eighth graders and 70.6% of seniors felt that beer was easy to get; 60.1% of eighth graders and 36.9% of seniors felt there was not a great risk in using it regularly.

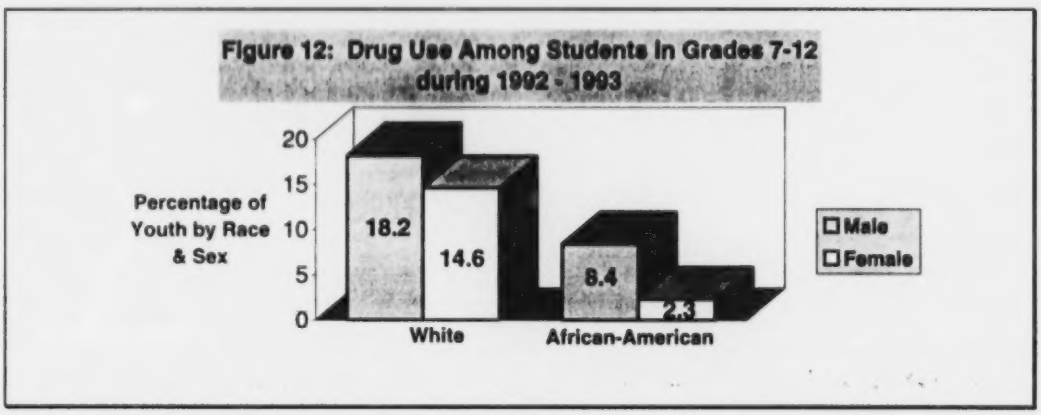
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 14.3% of all high school students in 1992-93 responded 3 or more drinks at a time; 5.6% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 5.6% of 7th and 8th graders and 7.7% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (18.2%) and White females (14.6%); use among African-American males was 8.4%; African-American females, 2.3%. Some young people first used drugs at an early age: among students 15 and older, 3.0% experienced their first use by age 11 or sooner; 5.6% had used a drug by age 13, and 9.6% by age 15.

Of seniors who had initiated use of marijuana, 0.0% had started use at home, 17.8% at a friend's home, and 82.2% elsewhere. During the past year, 1.8% of all high school students said that they used marijuana at home, 3.5% at a friend's house, and 3.5% in a car. In the past year, 5.4% of all high school students who drive and 8.3% of seniors who drive said that they had driven after using drugs . Furthermore, 7.2% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 27.2% of 8th graders who had an opinion said it is easy to get marijuana and 27.3% said it is easy to get cocaine or crack; 62.8% of seniors who had an opinion said it is easy to get marijuana and 56.7% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 12.5% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 176 individual juvenile offenders in the county were referred to the Solicitor; of these, 22.7% were age 12 or younger, 26.7% were 13 or 14, and 50.6% were 15 or older.

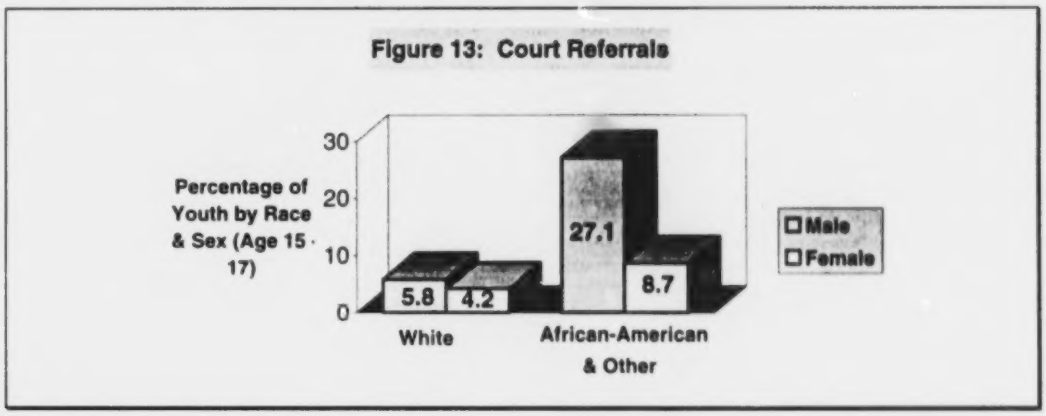
Of the referrals to the family court, 17.8% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 32 juvenile cases constituting 12.6% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 48.9% lived in families with income under $10,000, 46.6% with $10,000-$19,999 and 4.5% with $20,000 or more. Furthermore, only 20.8% of delinquents lived with both natural parents, while 47.2% lived in a single parent household and 32.1% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 62.9% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 30.1% had at least one prior referral and 10.2% had been referred to court 3 times or more.

In 1994-95, there were 4 juvenile commitments from the county to State institutions.

During 1994-95, 89 youth ages 15 to 17 were referred to the family courts. In the county, 12.7% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 12 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 1 deaths between 1990 and 1994; homicides killed 5 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 34.8% of children in single-parent families, 33.5% in poverty, 38.2% dropping out of school, 33.3% of high school students using alcohol and 12.5% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

Dr. A. Baron Holmes (803-734-2291) E-mail bholmes@ogc.state.sc.us
-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

JASPER

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	26	9.4	7.3	1.29	27	1994
Births to Mothers Not Completing High School	59	21.4	21.8	0.98	11	1994
Births to Single Mothers	126	45.7	30.4	1.50	36	1994
Children in Single-Parent Families	1,386	34.8	25.1	1.39	41	1990
Parents Working	1,299	72.7	74.3	0.98	14	1990
Abuse & Neglect Victims	23	0.4	1.0	0.40	3	1995-96
Separation from Parents	424	8.5	5.1	1.67	44	1990
Economic Status						
Poor Children	1,654	33.5	21.0	1.60	37	1989
Mean Income of Families with Children	$26,915	NA	NA	0.76	41	1989
Health						
Less than Adequate Prenatal Care	109	39.5	32.0	1.23	37	1994
Low Birth Weight	19	6.9	9.2	0.75	3	1994
Not Adequately Immunized	46	11.0	18.0	0.61	18	1995
Cigarette Smokers (High School)	52	10.6	23.1	0.46	3	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	89	31.3	28.1	1.11	32	1994-95
1st Grade Failures	5	2.0	6.8	0.29	3	1994-95
Failures grades 1-3 (approx. %)	11	4.5	11.3	0.40	3	1994-95
Overage for Grade 3	51	21.3	16.2	1.31	37	1995-96
Special Education (ages 8 and 9)	51	10.6	15.3	0.69	1	1995-96
School Achievement						
Special Education Grades 1 - 12	339	12.9	13.0	0.99	18	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	107	51.2	27.9	1.84	44	1995-96
Grade 8 BSAP - Math (Below standards)	104	46.4	34.8	1.33	37	1995-96
Grade 8 BSAP - Reading (Below standards)	81	36.7	28.8	1.27	33	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	136	59.1	29.5	2.00	46	1995-96
Exit Exam (Not passing all parts on 1st attempt)	94	58.0	35.3	1.64	44	1995-96
Dropout Rate	339	38.2	27.3	1.40	41	1992-95
25-34 Year olds with no HS Degree or GED	690	28.6	19.1	1.50	38	1990
Adolescent Risk Behavior						
Not in School or Employed	98	12.0	9.6	1.25	34	1990
Pregnancy (Ages 14 - 17)	34	6.8	4.8	1.42	40	1994
Alcohol Use (High School)	165	33.3	37.4	0.89	13	1992-93
Drug Use (High School)	38	7.7	12.8	0.60	16	1992-93
Binge Drinking (5 or more drinks)	28	5.6	16.3	0.34	1	1992-93
Delinquency (ages 15 - 17)	89	12.7	6.4	1.98	45	1994-95

* 1 = "best" 46 = "worst"

JASPER TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	24	8.0	1.21	1992	15	5.2	0.79	1993	26	9.4	1.29	1994
Births to Mothers Not Completing High School	92	30.7	1.30	1992	69	24.1	1.08	1993	59	21.4	0.98	1994
Births to Single Mothers	146	48.7	1.61	1992	138	48.3	1.59	1993	126	45.7	1.50	1994
Children in Single-Parent Families		15.4	1.06	1970		22.8	1.21	1980	1,386	34.8	1.39	1990
Economic Status												
Poor Children		44.9	1.56	1969		35.6	1.68	1979	1,654	33.5	1.60	1989
Mean Income of Families with Children					26,827	N/A	1.23	1979	26,915	N/A	1.32	1989
Health												
Less than Adequate Prenatal Care	136	45.3	1.15	1992	81	28.3	0.80	1993	109	39.5	1.23	1994
Low Birth Weight	27	9.0	1.00	1992	36	12.6	1.35	1993	19	6.9	0.75	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	92	35.2	1.32	1990-91	84	32.3	1.16	1992-93	89	31.3	1.11	1994-95
1st Grade Failures	41	16.5	1.83	1991-92	22	10.3	1.06	1992-93	5	2.0	0.29	1994-95
Failures Grades 1-3 (approx. %)	65	26.9	1.91	1991-92	54	26.3	1.84	1992-93	11	4.5	0.40	1994-95
Overage for Grade 3	65	27.8	1.06	1991-92	62	26.1	1.27	1993-94	51	21.3	1.31	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	99	39.3	2.04	1991-92	67	33.5	1.69	1993-94	107	51.2	1.84	1995-96*
Grade 8 BSAP - Math (Below Standards)	66	35.3	1.31	1991-92	109	51.2	1.66	1993-94	104	46.4	1.33	1995-96
Grade 8 BSAP - Reading (Below Standards)	51	27.3	1.12	1991-92	92	43.2	1.50	1993-94	81	36.7	1.27	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	42	26.3	1.20	1991-92	79	37.3	1.53	1993-94	136	59.1	2.00	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	66	52.8	1.70	1991-92	87	58.0	1.77	1993-94	94	58.0	1.64	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	31	6.3	1.34	1992	25	5.1	1.13	1993	34	6.8	1.42	1994
Alcohol Use (High School)	168	30.9	0.77	1989-90					165	33.3	0.89	1992-93
Drug Use (High School)	35	6.4	0.48	1989-90					38	7.7	0.60	1992-93
Binge Drinking (5 or more drinks)		7.8	0.50	1989-90					28	5.6	0.34	1992-93

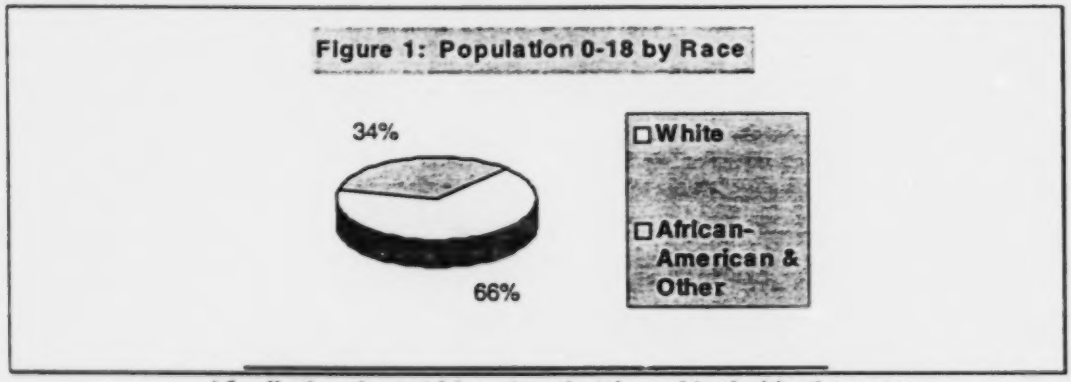
SOUTH CAROLINA kids count

1996 Report KERSHAW

DEMOGRAPHICS

In 1994, there were 12,310 children under age 18 in the county. Of these, 8,080 were White and 4,230 were African-American and Other races. There were 12,260 children under age 18 in 1980, 13,377 in 1970, and 15,024 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 26.6% of the population in 1994, down from 44.7% in 1960, 38.5% in 1970 and 31.4% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 36.3% of all households in 1990, as compared with 50.0% of households in 1960, had children below the age of 18.

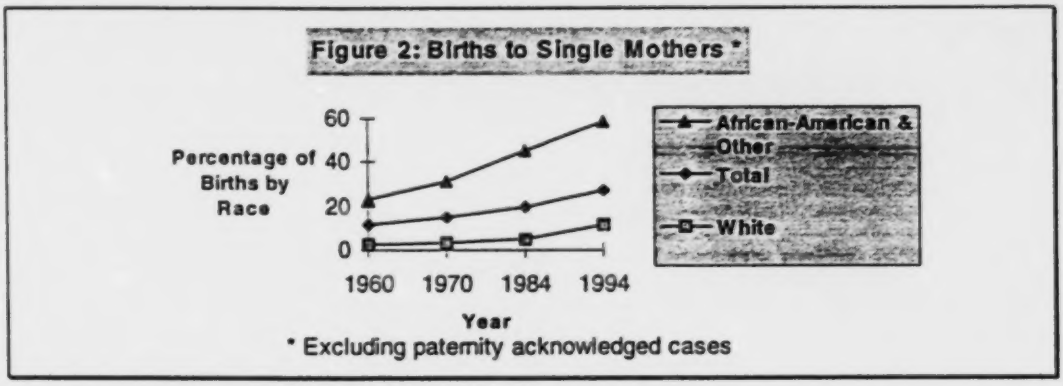
Births to Teen Mothers: In 1994, 47 babies were born to mothers younger than age 18. These babies were 7.7% of all children born in the county; 5.6% of all White babies and 12.1% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 70.2% were born to single mothers.

In 1994, 100 babies were born to mothers younger than age 20. These babies were 16.4% of all children born in the county; 14.4% of all White babies and 20.7% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 57.0% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 137 babies, 22.5% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 43.9% in 1970.

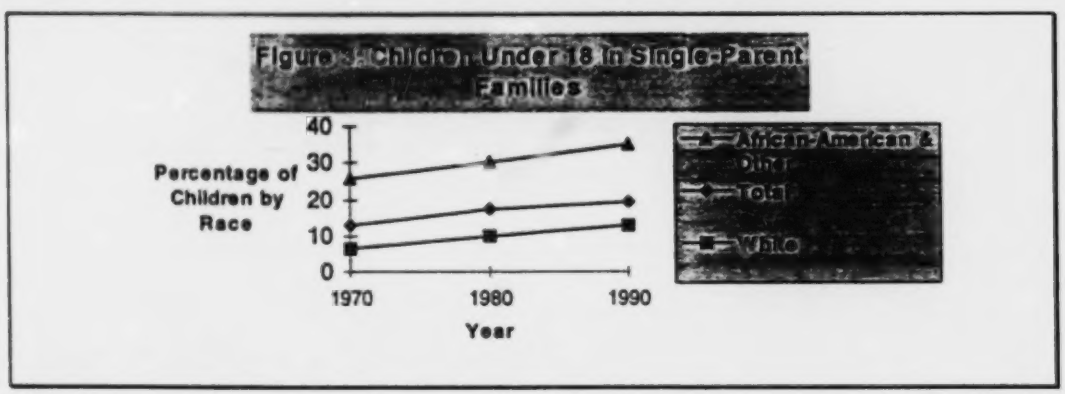
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 164 babies, 27.0% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 19.9% and in 1960 it was 11.4%. In 1994, 11.7% of White children and 58.6% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 38 babies, 6.3% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 202, constituting 33.2% of all babies, 16.6% of White babies, and 67.7% of African-American and Others.



Divorce Rate: In 1994, 420 marriage licenses were issued, while 203 divorce decrees involving 156 children were filed. In 1970 only 99 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 1,974 children lived with only one parent. This was 19.5% of all children, up from 17.1% in 1980 and 13.0% in 1970. In 1990, 12.9% of White children and 35.3% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 70.8% of mothers with children under 6 and 76.9% with children 6 - 17 were in the labor force. This has increased substantially from 36.5% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 572 children investigated as alleged child abuse and neglect victims: 30.9% for physical abuse, 9.6% for sexual abuse, 49.0% for neglect, and 45.1% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 71 children were victims of abuse and neglect: of these 40.8% were male and 59.2% were female; 54.9% were White, and 45.1% were African-American and Other. By age, 32.4% were 0 - 5, 49.3% were 6 - 12, and 18.3% were 13 - 17. They constituted 0.6% of all children age 18 or younger; 0.5% of all Whites and 0.7% of all African-Americans and Others. In the verified cases, 12.7% of abused and neglected children lived in two parent families, 45.1% in single parent families, 14.1% with extended families, and 28.2% in other circumstances.

Family Violence: In 1994, 227 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 30.0% of all assaults, which include both simple and aggravated assaults. Overall, 67.0% of all domestic assaults involve spouse abuse (constituting 20.0% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 5.4% of all children did not live with their natural parents; of these, 275 or 2.3% of children lived with relatives, 206 or 1.7% lived with non-relatives, and 157 were in institutional facilities.

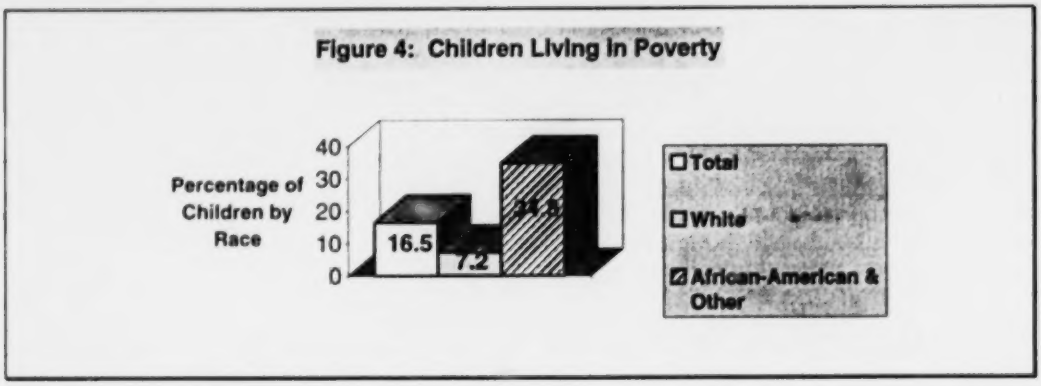
Out of Home Placements: As of September 30, 1996, 57 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 7.0% 0-2, 15.8% 3-5, 26.3% 6-10, 19.3% 11-13, and 31.6% 14 and above. The foster care population is comprised of 36.8% males and 63.2% females. Regarding their future, 17.5% were under a plan for placement in adoptive homes, 22.8% for return to a parent or guardian, 0.0% for placement with a relative, 35.1% for independent living, 8.8% for permanent foster care, and 0.0% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.76 adults for every person below age 18. This was up substantially from 1960, when there were only 1.24 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 1,891 children and youth under the age of 18 lived in families with incomes below poverty. Over 16.5% of all children and youth lived below poverty: 7.2% of Whites and 34.8% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 16.5% in 1989, it was 19.3% in 1979 and 27.1% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 18.2% of children 0 - 5 and 15.7% of children 6 - 17 lived in poverty; 19.3% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 35.7% of children in single-parent families lived in poverty, but only 9.5% of children in married-couple families were poor. Children in single-parent families made up 55.1% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 2,672 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 781 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	11,488	1,891	2,672	3,125	4,107	4,384	4,875
Percent		16.5%	23.3%	27.2%	35.8%	38.2%	42.4%
White	7,631	549	930	1,097	1,704	1,934	2,292
Percent		7.2%	12.2%	14.4%	22.3%	25.3%	30.0%
African-American and Other	3,857	1,342	1,742	2,028	2,403	2,450	2,583
Percent		34.8%	45.2%	52.6%	62.3%	63.5%	67.0%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 9.5% of households did not have a car; 5.1% of Whites and 22.2% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 9.2% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 24.1% of households had no phone.

Income: The mean income of families with children in 1989 was $35,139; in 1979, it had been $34,419, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by -1.6%.

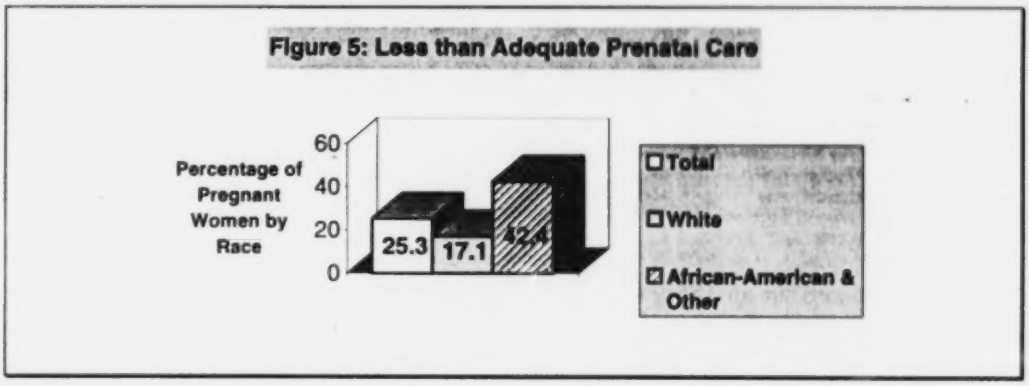
The mean income of single-parent families with children was $18,309 in 1989, as compared with $39,579 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 406 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 32.0% had child support court orders. The average monthly payment of child support was $147.26, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 320 parents in non-AFDC families were obligated to pay a monthly average of $175.23. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 135 or 22.2% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 154 or 25.3% of pregnant women received less than adequate prenatal care: 70 or 17.1% of Whites and 84 or 42.4% of African-Americans and Others. In that same year, 10 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 52 or 8.6% of all babies in the county were born with low birthweight. Over 15.2% of African-American babies and 5.4% of White babies were born with low birthweight. During 1992-94, approximately 29 or 1.5% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 35.3%. For Whites, the rate decreased by 67.7%, while for African-Americans and Others, the rate increased by 40.9%. Over the three-year period 1992-94, 5 White and 9 African-American and Other infants died before age one. By comparison, 13 White and 7 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 8 White and 4 African-American and Other children ages 1-14 died in the county. During 1982-84, 11 White and 5 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 40.6% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 7.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 493 to 740 youth ages 13-19 in the county were infected with a STD. In the county, there was 1 reported case of children under age 15 and 23 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 15.5% first smoked by age 11, 33.7% by age 13, and 46.9% by age 15. In a typical month, 17.1% of 7th and 8th graders and 28.2% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 32.6% of White 7th to 12th graders used cigarettes, in comparison with 6.7% African-Americans. A smaller but significant group of high school students (13.2%) used smokeless tobacco monthly; it was used primarily by White males (35.3%) compared with 0.8% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 1,231 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 492 students in grades 1-12 with learning disabilities and 255 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 844 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 1,822 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 12 nurses; 5 are currently available.

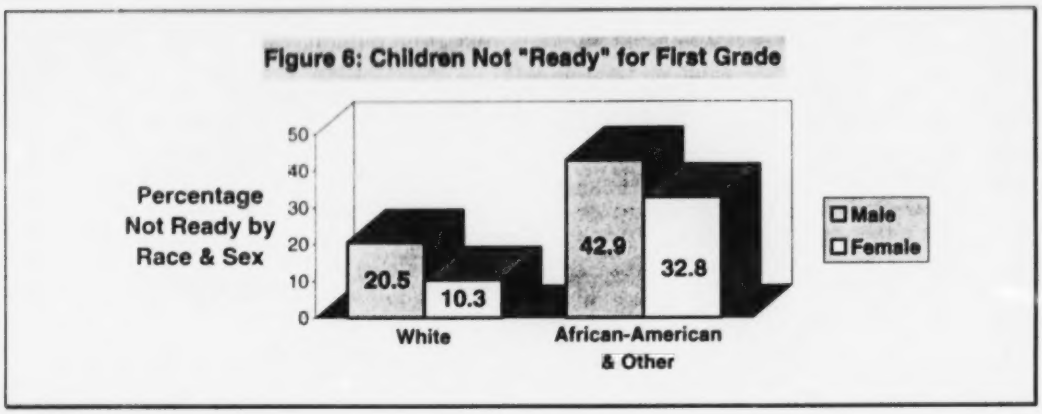
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 45.5% for Whites and 53.3% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

131 children not ready	25.1% children not ready

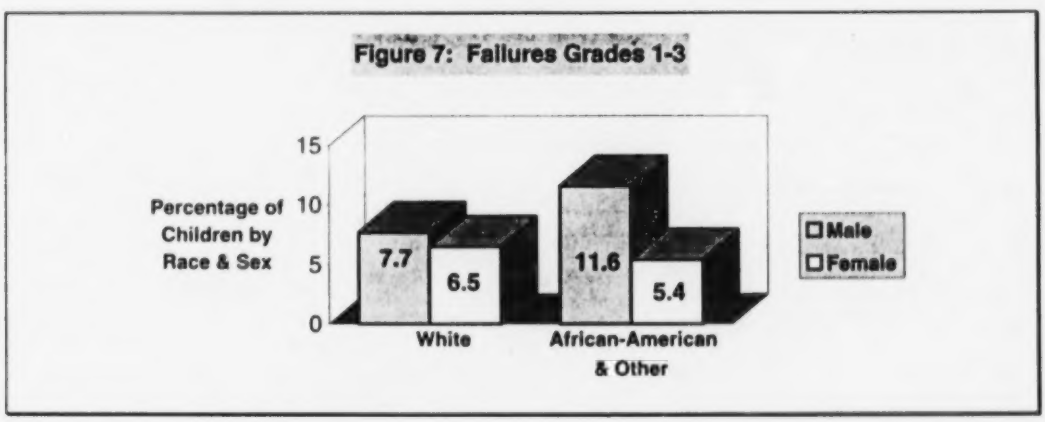


1st Grade Failures in 1995:

15 children failing	2.2% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

55 children failing	7.6% children failing



Overage for Grade 3 in 1996:

41 children overage	6.2% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 201 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 14.5% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 25.1% assessed not ready for the 1st grade, 6.2% overage in grade 3, and 14.5% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

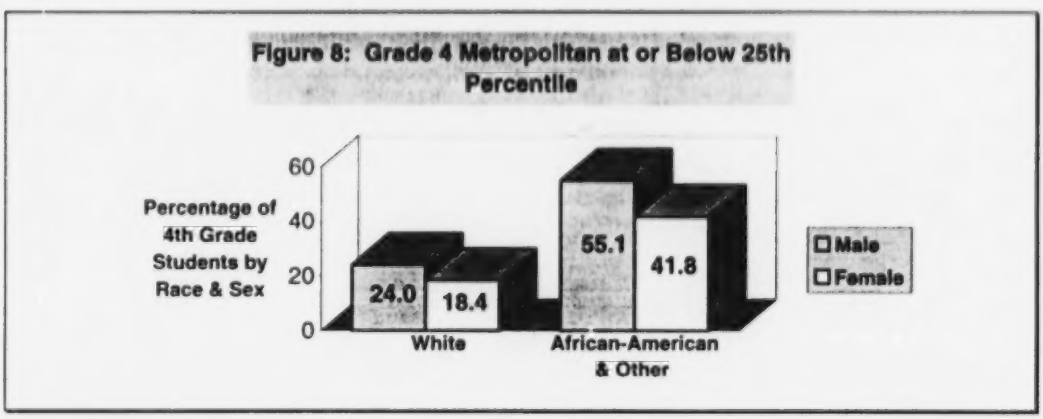
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 255 speech and language impaired, 492 learning disabled, 52 emotionally disabled, 163 mentally impaired, and 33 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 11.6% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

185 children at or below 25th percentile	30.3% children at or below 25th percentile



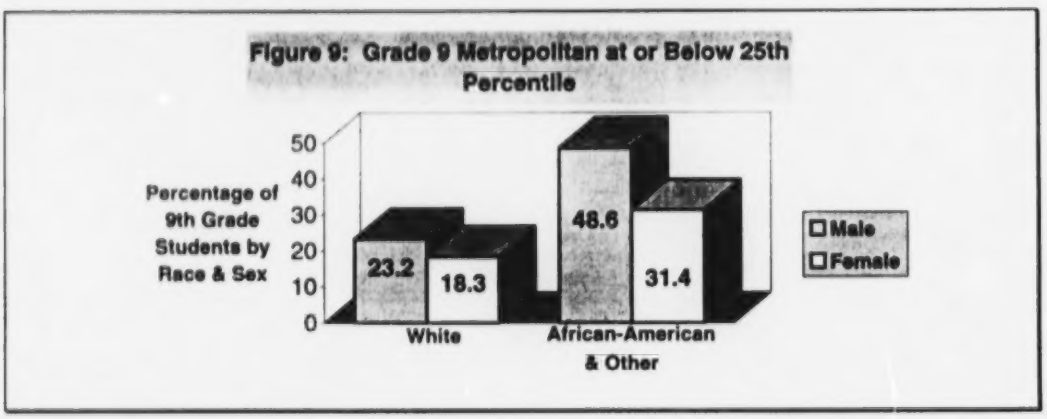
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	222	29.7	189	25.3
White Males	55	22.4	53	21.5
White Females	48	21.5	36	16.1
African-American & Other Males	68	47.9	61	43.0
African-American & Other Females	50	36.8	38	27.9

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

226 students at or below 25th percentile

27.5% students at or below 25th percentile

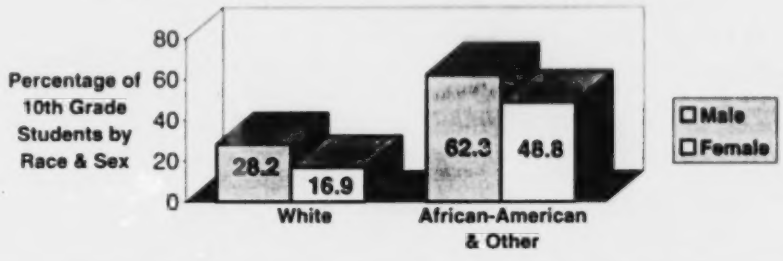


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

224 students not passing all parts

34.2% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



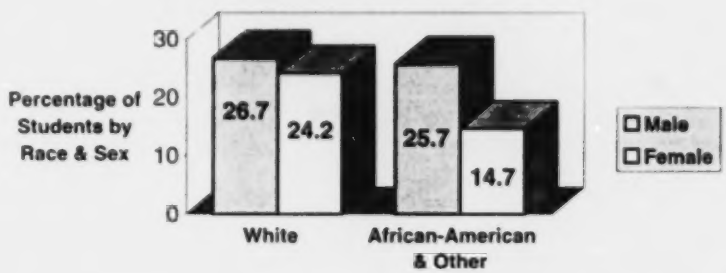
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 45.0% to 22.4% in math and from 44.1% to 21.2% in reading. During the 1990s the trend altered, with 29.7% not meeting 8th grade math standards in 1996 and 25.3% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 20.9% in 1983 on the CTBS, 29.7% in 1990 on the Stanford, and 31.9% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 29.8% in 1990 and 28.4% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

654 students drop out

23.9% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 25.6% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 25.3% during 1985-89, and 23.0% during 1990-94. During the 1995-96 period, 92.6% of all who did graduate received the State High School Diploma, while 2.4% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 5.0% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 10 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 66 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 21.5% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 23.9% to 34.2%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 208 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 7.5% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

1.5%	White Males	4.8%	African-American & Other Males
16.5%	White Females	7.1%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 73 girls between the ages of 14 and 17 became pregnant in 1993 and 61 in 1994. In 1994, this represented 4.7% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 3.5% for Whites and 6.8% for African-Americans and others. Of all pregnancies to 14-17 year olds, 75.4% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it increased by 10.2%.

Alcohol Use: In 1992-93, 19.6% of 7th and 8th graders and 39.1% of high schoolers said they had used alcohol in the past month. Of White males, 38.2% had used it in the past month, compared with 26.8% of African-American males; likewise, 32.3% of White females said they had used alcohol, compared with 20.9% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 15.7% had used alcohol by age 11 or younger, 34.8% by age 13, and 60.2% by age 15.

During the previous year, 33.4% of 7th and 8th graders and 44.8% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 32.7% said they had driven after drinking, and 9.8% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 57.8% of eighth graders and 90.1% of seniors felt that beer was easy to get; 52.5% of eighth graders and 50.1% of seniors felt there was not a great risk in using it regularly.

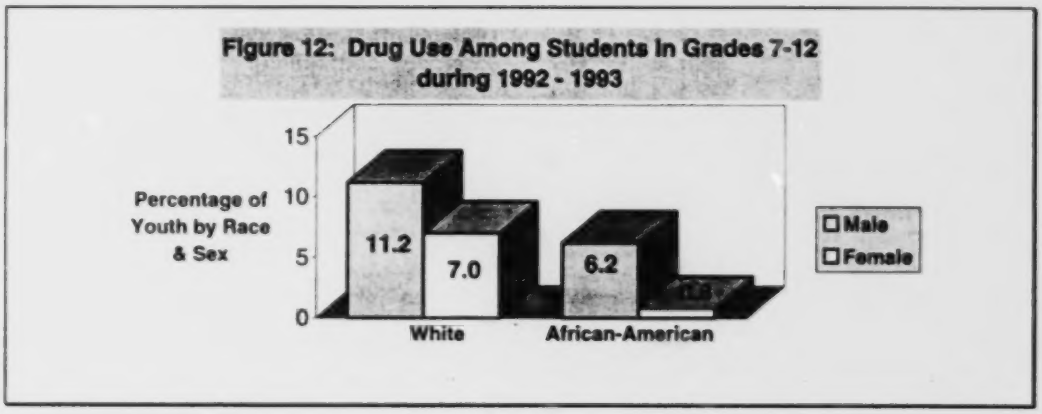
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 31.1% of all high school students in 1992-93 responded 3 or more drinks at a time; 18.6% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 3.9% of 7th and 8th graders and 9.4% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (11.2%) and White females (7.0%); use among African-American males was 6.2%; African-American females, 0.8%. Some young people first used drugs at an early age: among students 15 and older, 2.4% experienced their first use by age 11 or sooner; 7.8% had used a drug by age 13, and 14.5% by age 15.

Of seniors who had initiated use of marijuana, 6.3% had started use at home, 50.0% at a friend's home, and 43.7% elsewhere. During the past year, 2.5% of all high school students said that they used marijuana at home, 6.7% at a friend's house, and 5.0% in a car. In the past year, 5.6% of all high school students who drive and 8.8% of seniors who drive said that they had driven after using drugs . Furthermore, 6.4% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 19.3% of 8th graders who had an opinion said it is easy to get marijuana and 13.5% said it is easy to get cocaine or crack; 69.6% of seniors who had an opinion said it is easy to get marijuana and 50.1% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 15.2% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 202 individual juvenile offenders in the county were referred to the Solicitor; of these, 18.8% were age 12 or younger, 27.2% were 13 or 14, and 54.0% were 15 or older.

Of the referrals to the family court, 14.2% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 74 juvenile cases constituting 24.4% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

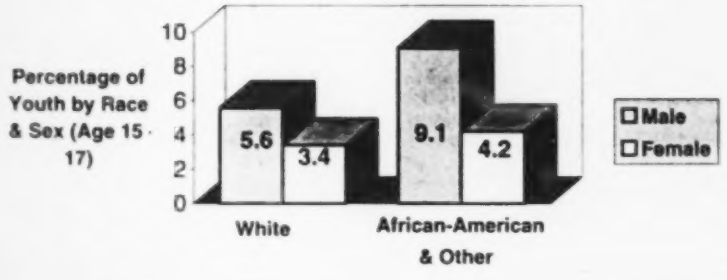
Delinquents are likely to live in families with low income: 28.4% lived in families with income under $10,000, 34.6% with $10,000-$19,999 and 37.0% with $20,000 or more. Furthermore, only 25.0% of delinquents lived with both natural parents, while 54.6% lived in a single parent household and 20.4% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 36.0% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 34.7% had at least one prior referral and 9.9% had been referred to court 3 times or more.

In 1994-95, there were 12 juvenile commitments from the county to State institutions.

During 1994-95, 109 youth ages 15 to 17 were referred to the family courts. In the county, 5.2% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.

Figure 13: Court Referrals



Deaths: During 1990-94, 7 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 3 deaths between 1990 and 1994; homicides killed 0 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 19.5% of children in single-parent families, 16.5% in poverty, 23.9% dropping out of school, 39.1% of high school students using alcohol and 15.2% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

KERSHAW

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	47	7.7	7.3	1.05	18	1994
Births to Mothers Not Completing High School	137	22.5	21.8	1.03	13	1994
Births to Single Mothers	164	27.0	30.4	0.89	9	1994
Children in Single-Parent Families	1,974	19.5	25.1	0.78	6	1990
Parents Working	3,812	75.1	74.3	1.01	23	1990
Abuse & Neglect Victims	71	0.6	1.0	0.60	7	1995-96
Separation from Parents	638	5.4	5.1	1.06	18	1990
Economic Status						
Poor Children	1,891	16.5	21.0	0.79	10	1989
Mean Income of Families with Children	$35,139	NA	NA	0.99	13	1989
Health						
Less than Adequate Prenatal Care	154	25.3	32.0	0.79	8	1994
Low Birth Weight	52	8.6	9.2	0.93	15	1994
Not Adequately Immunized	51	7.0	18.0	0.39	5	1995
Cigarette Smokers (High School)	619	28.2	23.1	1.22	43	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	131	25.1	28.1	0.89	13	1994-95
1st Grade Failures	15	2.2	6.8	0.32	4	1994-95
Failures grades 1-3 (approx. %)	55	7.6	11.3	0.67	8	1994-95
Overage for Grade 3	41	6.2	16.2	0.38	2	1995-96
Special Education (ages 8 and 9)	201	14.5	15.3	0.95	20	1995-96
School Achievement						
Special Education Grades 1 - 12	995	11.6	13.0	0.89	9	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	185	30.3	27.9	1.09	21	1995-96
Grade 8 BSAP - Math (Below standards)	222	29.7	34.8	0.85	10	1995-96
Grade 8 BSAP - Reading (Below standards)	189	25.3	28.8	0.88	12	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	226	27.5	29.5	0.93	14	1995-96
Exit Exam (Not passing all parts on 1st attempt)	224	34.2	35.3	0.97	16	1995-96
Dropout Rate	654	23.9	27.3	0.88	10	1992-95
25-34 Year olds with no HS Degree or GED	1,513	21.5	19.1	1.13	14	1990
Adolescent Risk Behavior						
Not in School or Employed	208	7.5	9.6	0.78	6	1990
Pregnancy (Ages 14 - 17)	61	4.7	4.8	0.98	15	1994
Alcohol Use (High School)	858	39.1	37.4	1.05	33	1992-93
Drug Use (High School)	206	9.4	12.8	0.73	26	1992-93
Binge Drinking (5 or more drinks)	408	18.6	16.3	1.14	37	1992-93
Delinquency (ages 15 - 17)	109	5.2	6.4	0.81	14	1994-95

* 1 = "best" 46 = "worst"

KERSHAW TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	40	6.0	0.91	1992	50	7.4	1.12	1993	47	7.7	1.05	1994
Births to Mothers Not Completing High School	155	23.1	0.98	1992	150	22.3	1.00	1993	137	22.5	1.03	1994
Births to Single Mothers	189	28.2	0.93	1992	171	25.4	0.84	1993	164	27.0	0.89	1994
Children in Single-Parent Families		13.0	0.90	1970		17.1	0.90	1980	1,974	19.5	0.78	1990
Economic Status												
Poor Children		27.1	0.94	1969		19.3	0.91	1979	1,891	16.5	0.79	1989
Mean Income of Families with Children					34,419	N/A	0.96	1979	35,139	N/A	1.01	1989
Health												
Less than Adequate Prenatal Care	274	40.9	1.04	1992	230	34.2	0.97	1993	154	25.3	0.79	1994
Low Birth Weight	56	8.4	0.93	1992	57	8.5	0.91	1993	52	8.6	0.93	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	168	23.6	0.89	1990-91	205	29.7	1.07	1992-93	131	25.1	0.89	1994-95
1st Grade Failures	22	3.1	0.34	1991-92	17	2.6	0.27	1992-93	15	2.2	0.32	1994-95
Failures Grades 1-3 (approx. %)	41	5.7	0.40	1991-92	27	4.1	0.29	1992-93	55	7.6	0.67	1994-95
Overage for Grade 3	145	20.7	0.79	1991-92	81	11.9	0.58	1993-94	41	6.2	0.38	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	178	25.2	1.31	1991-92	134	18.6	0.94	1993-94	185	30.3	1.09	1995-96*
Grade 8 BSAP - Math (Below Standards)	170	24.3	0.90	1991-92	190	26.3	0.85	1993-94	222	29.7	0.85	1995-96
Grade 8 BSAP - Reading (Below Standards)	159	22.7	0.93	1991-92	189	26.1	0.91	1993-94	189	25.3	0.88	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	161	21.6	0.99	1991-92	174	21.3	0.88	1993-94	226	27.5	0.93	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	155	26.4	0.85	1991-92	188	31.0	0.95	1993-94	224	34.2	0.97	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	61	4.8	1.02	1992	73	5.7	1.27	1993	61	4.7	0.98	1994
Alcohol Use (High School)	928	42.0	1.04	1989-90					858	39.1	1.05	1992-93
Drug Use (High School)	256	11.6	0.87	1989-90					206	9.4	0.73	1992-93
Binge Drinking (5 or more drinks)		17.2	1.10	1989-90					408	18.6	1.14	1992-93

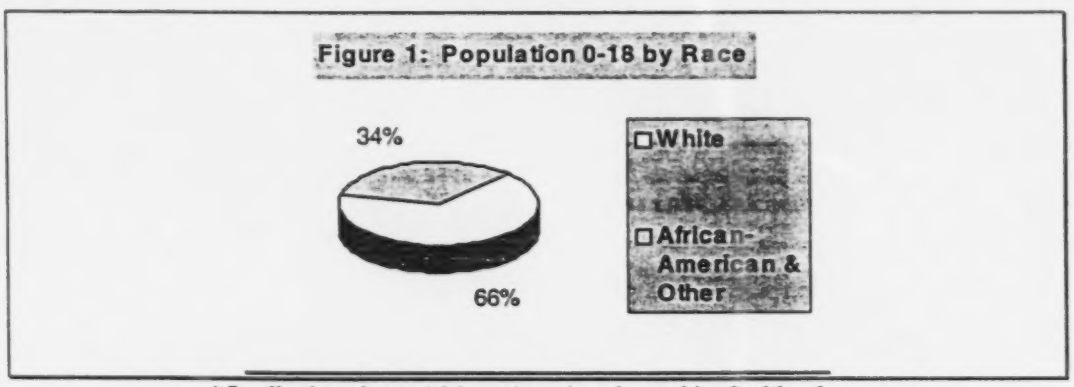
SOUTH CAROLINA kids count

1996 Report LANCASTER

DEMOGRAPHICS

In 1994, there were 14,900 children under age 18 in the county. Of these, 9,870 were White and 5,030 were African-American and Other races. There were 16,616 children under age 18 in 1980, 16,231 in 1970, and 16,646 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 26.7% of the population in 1994, down from 42.3% in 1960, 37.5% in 1970 and 31.1% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 36.6% of all households in 1990, as compared with 50.0% of households in 1960, had children below the age of 18.

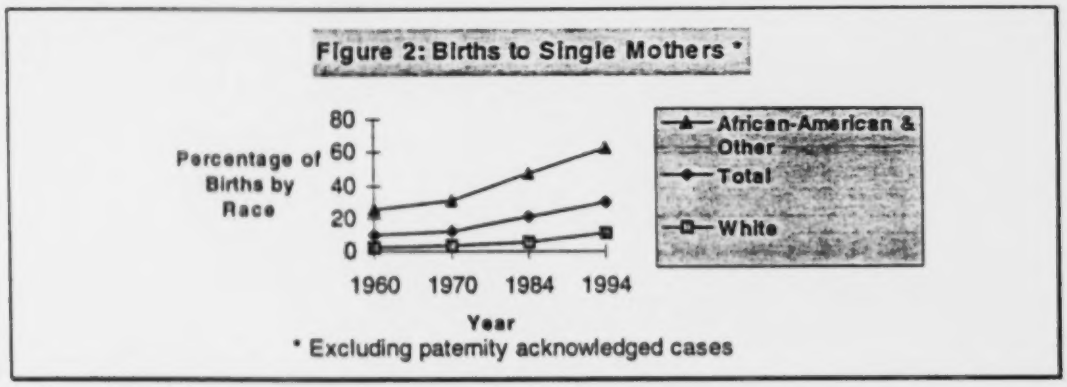
Births to Teen Mothers: In 1994, 72 babies were born to mothers younger than age 18. These babies were 8.9% of all children born in the county; 6.4% of all White babies and 13.4% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 65.3% were born to single mothers.

In 1994, 156 babies were born to mothers younger than age 20. These babies were 19.2% of all children born in the county; 13.8% of all White babies and 29.2% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 60.3% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 207 babies, 25.5% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 51.0% in 1970.

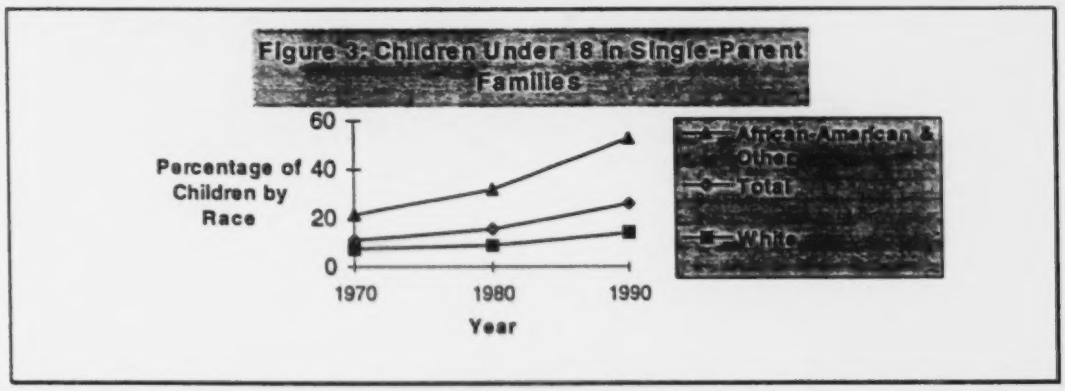
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 237 babies, 29.2% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 20.7% and in 1960 it was 9.5%. In 1994, 11.0% of White children and 63.0% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 85 babies, 10.5% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 322, constituting 39.6% of all babies, 19.5% of White babies, and 77.1% of African-American and Others.



Divorce Rate: In 1994, 1,033 marriage licenses were issued, while 213 divorce decrees involving 215 children were filed. In 1970 only 124 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 3,298 children lived with only one parent. This was 25.8% of all children, up from 15.6% in 1980 and 11.3% in 1970. In 1990, 14.4% of White children and 52.5% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 66.4% of mothers with children under 6 and 84.8% with children 6 - 17 were in the labor force. This has increased substantially from 50.5% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 813 children investigated as alleged child abuse and neglect victims: 26.9% for physical abuse, 10.5% for sexual abuse, 70.6% for neglect, and 42.7% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 202 children were victims of abuse and neglect: of these 57.4% were male and 42.6% were female; 57.9% were White, and 42.1% were African-American and Other. By age, 40.1% were 0 - 5, 38.6% were 6 - 12, and 21.3% were 13 - 17. They constituted 1.3% of all children age 18 or younger; 1.2% of all Whites and 1.7% of all African-Americans and Others. In the verified cases, 23.8% of abused and neglected children lived in two parent families, 49.0% in single parent families, 6.9% with extended families, and 20.3% in other circumstances.

Family Violence: In 1994, 336 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 21.0% of all assaults, which include both simple and aggravated assaults. Overall, 51.8% of all domestic assaults involve spouse abuse (constituting 10.7% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 3.6% of all children did not live with their natural parents; of these, 254 or 1.7% of children lived with relatives, 255 or 1.7% lived with non-relatives, and 15 were in institutional facilities.

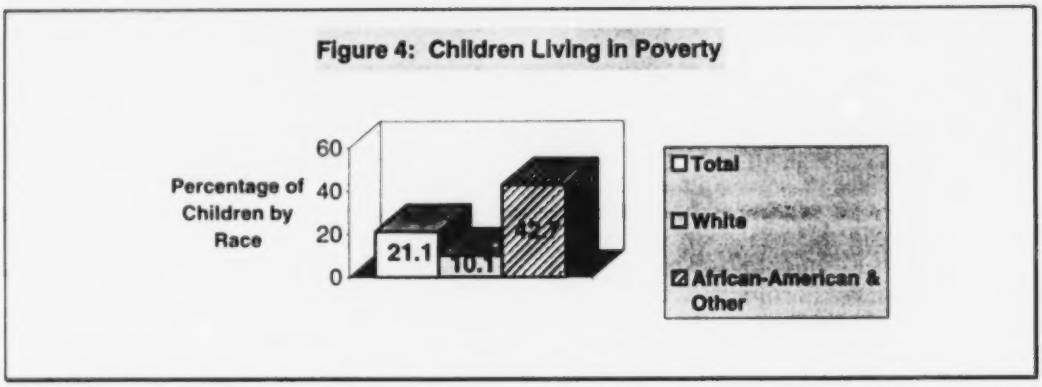
Out of Home Placements: As of September 30, 1996, 66 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 10.6% 0-2, 16.7% 3-5, 24.2% 6-10, 25.8% 11-13, and 22.7% 14 and above. The foster care population is comprised of 62.1% males and 37.9% females. Regarding their future, 50.0% were under a plan for placement in adoptive homes, 33.3% for return to a parent or guardian, 0.0% for placement with a relative, 12.1% for independent living, 4.5% for permanent foster care, and 0.0% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.75 adults for every person below age 18. This was up substantially from 1960, when there were only 1.36 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 3,046 children and youth under the age of 18 lived in families with incomes below poverty. Over 21.1% of all children and youth lived below poverty: 10.1% of Whites and 42.7% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 21.1% in 1989, it was 13.4% in 1979 and 18.8% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 24.5% of children 0 - 5 and 19.4% of children 6 - 17 lived in poverty; 21.2% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 51.2% of children in single-parent families lived in poverty, but only 8.9% of children in married-couple families were poor. Children in single-parent families made up 68.0% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 3,998 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 952 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	14,431	3,046	3,998	4,882	5,820	6,344	6,878
Percent		21.1%	27.7%	33.8%	40.3%	44.0%	47.7%
White	9,571	970	1,694	2,167	2,607	2,981	3,252
Percent		10.1%	17.7%	22.6%	27.2%	31.1%	34.0%
African-American and Other	4,860	2,076	2,304	2,715	3,213	3,363	3,626
Percent		42.7%	47.4%	55.9%	66.1%	69.2%	74.6%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 11.6% of households did not have a car; 6.8% of Whites and 28.5% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 13.4% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 34.1% of households had no phone.

Income: The mean income of families with children in 1989 was $34,108; in 1979, it had been $33,752, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 5.6%.

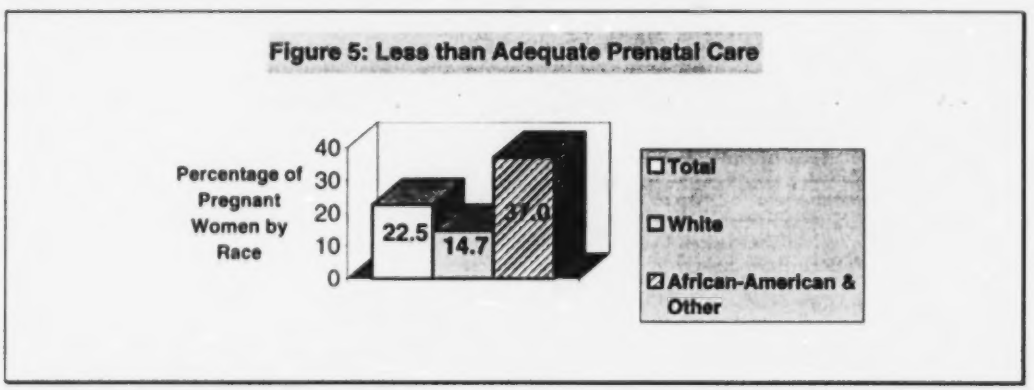
The mean income of single-parent families with children was $14,221 in 1989, as compared with $40,481 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 812 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 40.0% had child support court orders. The average monthly payment of child support was $143.18, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 113 parents in non-AFDC families were obligated to pay a monthly average of $191.34. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 163 or 20.0% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 183 or 22.5% of pregnant women received less than adequate prenatal care: 78 or 14.7% of Whites and 105 or 37.0% of African-Americans and Others. In that same year, 7 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 95 or 11.7% of all babies in the county were born with low birthweight. Over 14.4% of African-American babies and 10.2% of White babies were born with low birthweight. During 1992-94, approximately 58 or 2.4% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate increased by 7.8%. For Whites, the rate increased by 1.6%, while for African-Americans and Others, the rate increased by 20.2%. Over the three-year period 1992-94, 19 White and 11 African-American and Other infants died before age one. By comparison, 17 White and 9 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 9 White and 4 African-American and Other children ages 1-14 died in the county. During 1982-84, 7 White and 6 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 51.8% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 8.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 585 to 878 youth ages 13-19 in the county were infected with a STD. In the county, there were no reported cases of children under age 15 and 55 youth ages 15 - 19 infected with gonorrhea; 1 youth ages 15 - 19 was reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 14.0% first smoked by age 11, 30.4% by age 13, and 41.7% by age 15. In a typical month, 16.7% of 7th and 8th graders and 22.7% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 27.6% of White 7th to 12th graders used cigarettes, in comparison with 4.7% African-Americans. A smaller but significant group of high school students (6.7%) used smokeless tobacco monthly; it was used primarily by White males (17.0%) compared with 1.1% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 1,490 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 249 students in grades 1-12 with learning disabilities and 368 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 987 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 2,205 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 14 nurses; 2 are currently available.

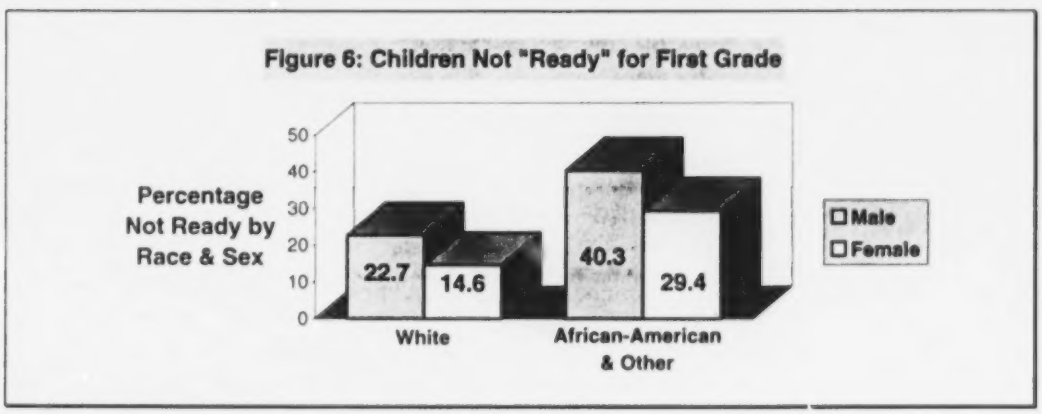
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 29.4% for Whites and 25.9% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

239 children not ready	**24.7% children not ready**

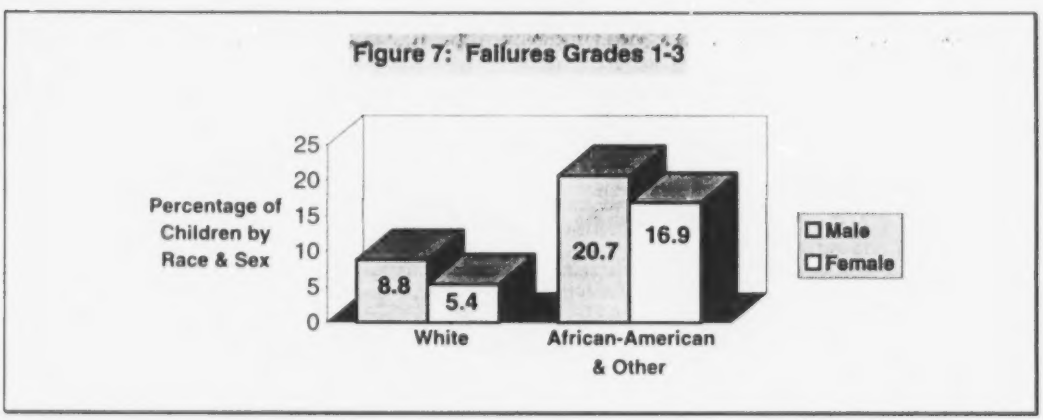


1st Grade Failures in 1995:

77 children failing	**7.6% children failing**

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

112 children failing	**11.6% children failing**



Overage for Grade 3 in 1996:

185 children overage	21.0% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 202 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 11.0% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 24.7% assessed not ready for the 1st grade, 21.0% overage in grade 3, and 11.0% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

SCHOOL ACHIEVEMENT

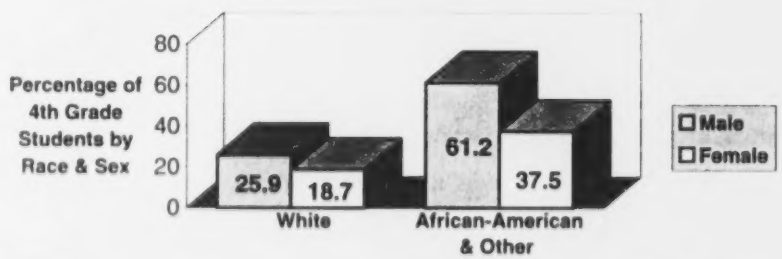
By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 368 speech and language impaired, 249 learning disabled, 33 emotionally disabled, 277 mentally impaired, and 46 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 10.1% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

249 children at or below 25th percentile	31.5% children at or below 25th percentile

Figure 8: Grade 4 Metropolitan at or Below 25th Percentile



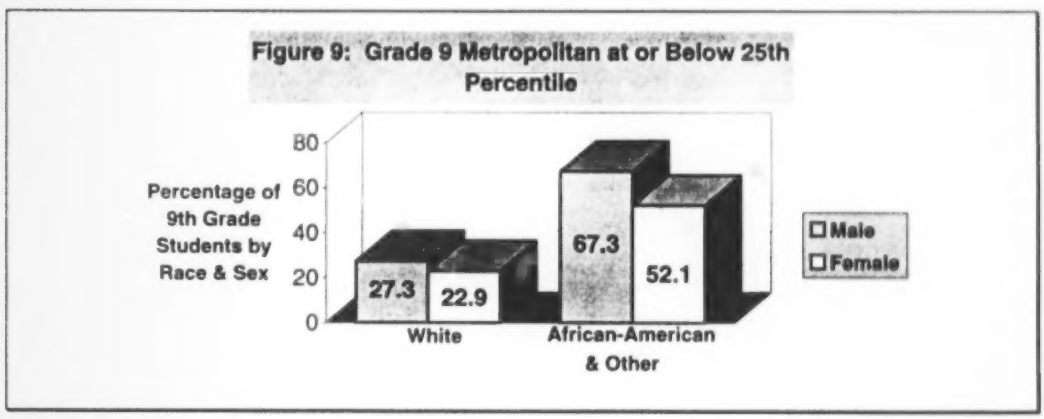
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	345	41.7	307	37.1
White Males	81	30.9	89	34.0
White Females	79	30.0	66	25.1
African-American & Other Males	105	66.5	97	61.8
African-American & Other Females	77	54.6	53	37.3

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

317 students at or below 25th percentile

37.4% students at or below 25th percentile

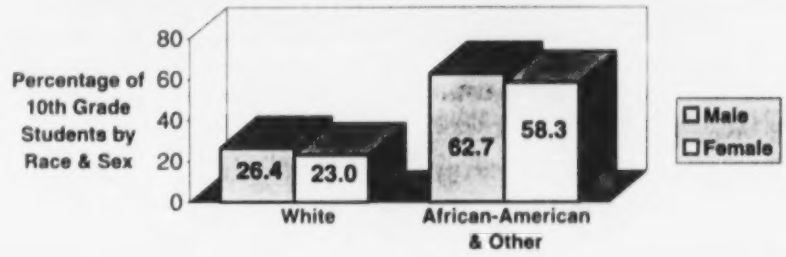


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

257 students not passing all parts

36.9% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam

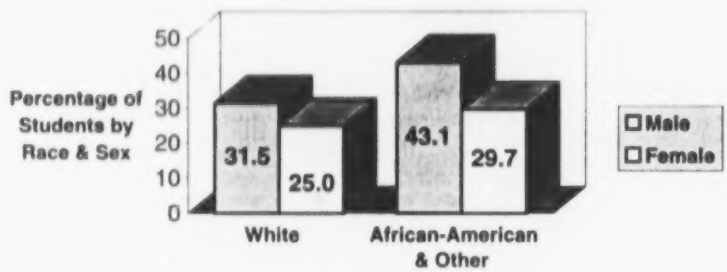


Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 67.5% to 28.1% in math and from 52.3% to 22.6% in reading. During the 1990s the trend altered, with 41.7% not meeting 8th grade math standards in 1996 and 37.1% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 37.2% in 1983 on the CTBS, 36.4% in 1990 on the Stanford, and 36.2% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 30.0% in 1990 and 31.6% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

1,028 students drop out	30.9% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 33.7% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 35.2% during 1985-89, and 35.3% during 1990-94. During the 1995-96 period, 95.7% of all who did graduate received the State High School Diploma, while 2.2% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 2.2% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 47 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 93 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 25.7% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 30.9% to 41.7%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 381 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 11.2% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

4.0%	White Males	11.4%	African-American & Other Males
15.0%	White Females	18.4%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 82 girls between the ages of 14 and 17 became pregnant in 1993 and 93 in 1994. In 1994, this represented 5.6% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 4.1% for Whites and 8.7% for African-Americans and others. Of all pregnancies to 14-17 year olds, 76.3% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it increased by 1.1%.

Alcohol Use: In 1992-93, 18.1% of 7th and 8th graders and 34.9% of high schoolers said they had used alcohol in the past month. Of White males, 34.1% had used it in the past month, compared with 26.8% of African-American males; likewise, 27.6% of White females said they had used alcohol, compared with 19.0% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 14.8% had used alcohol by age 11 or younger, 32.7% by age 13, and 56.0% by age 15.

During the previous year, 34.8% of 7th and 8th graders and 46.3% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 27.8% said they had driven after drinking, and 9.1% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 55.2% of eighth graders and 87.3% of seniors felt that beer was easy to get; 44.0% of eighth graders and 50.0% of seniors felt there was not a great risk in using it regularly.

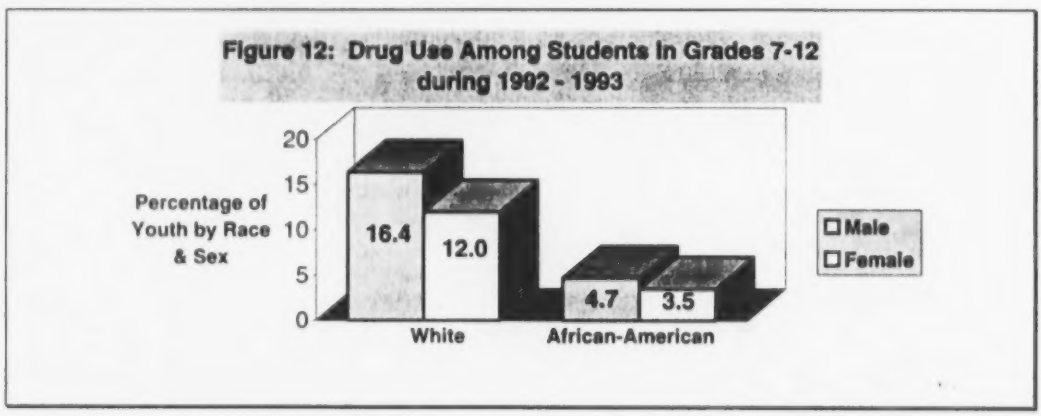
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 27.6% of all high school students in 1992-93 responded 3 or more drinks at a time; 16.3% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 7.8% of 7th and 8th graders and 13.0% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (16.4%) and White females (12.0%); use among African-American males was 4.7%; African-American females, 3.5%. Some young people first used drugs at an early age: among students 15 and older, 3.7% experienced their first use by age 11 or sooner; 10.1% had used a drug by age 13, and 18.2% by age 15.

Of seniors who had initiated use of marijuana, 9.7% had started use at home, 37.3% at a friend's home, and 53.0% elsewhere. During the past year, 4.3% of all high school students said that they used marijuana at home, 9.0% at a friend's house, and 7.1% in a car. In the past year, 7.5% of all high school students who drive and 11.3% of seniors who drive said that they had driven after using drugs . Furthermore, 8.7% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 29.0% of 8th graders who had an opinion said it is easy to get marijuana and 20.1% said it is easy to get cocaine or crack; 77.2% of seniors who had an opinion said it is easy to get marijuana and 66.2% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 21.1% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 472 individual juvenile offenders in the county were referred to the Solicitor; of these, 12.5% were age 12 or younger, 30.9% were 13 or 14, and 56.6% were 15 or older.

Of the referrals to the family court, 9.2% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 88 juvenile cases constituting 11.1% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

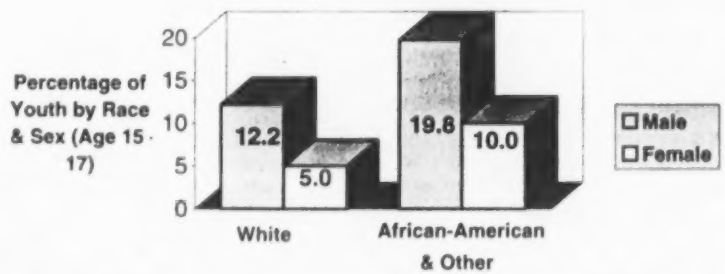
Delinquents are likely to live in families with low income: 26.6% lived in families with income under $10,000, 39.8% with $10,000-$19,999 and 33.6% with $20,000 or more. Furthermore, only 22.6% of delinquents lived with both natural parents, while 46.6% lived in a single parent household and 30.7% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 56.0% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 39.4% had at least one prior referral and 22.7% had been referred to court 3 times or more.

In 1994-95, there were 26 juvenile commitments from the county to State institutions.

During 1994-95, 267 youth ages 15 to 17 were referred to the family courts. In the county, 10.6% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.

Figure 13: Court Referrals



Deaths: During 1990-94, 22 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 15 deaths between 1990 and 1994; homicides killed 2 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 25.8% of children in single-parent families, 21.1% in poverty, 30.9% dropping out of school, 34.9% of high school students using alcohol and 21.1% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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-or-
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SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

LANCASTER

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	72	8.9	7.3	1.22	22	1994
Births to Mothers Not Completing High School	207	25.5	21.8	1.17	24	1994
Births to Single Mothers	237	29.2	30.4	0.96	10	1994
Children in Single-Parent Families	3,298	25.8	25.1	1.03	20	1990
Parents Working	4,789	79.3	74.3	1.07	43	1990
Abuse & Neglect Victims	202	1.3	1.0	1.30	34	1995-96
Separation from Parents	524	3.6	5.1	0.71	2	1990
Economic Status						
Poor Children	3,046	21.1	21.0	1.00	17	1989
Mean Income of Families with Children	$34,108	NA	NA	0.96	17	1989
Health						
Less than Adequate Prenatal Care	183	22.5	32.0	0.70	3	1994
Low Birth Weight	95	11.7	9.2	1.27	41	1994
Not Adequately Immunized	98	8.0	18.0	0.44	10	1995
Cigarette Smokers (High School)	552	22.7	23.1	0.98	27	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	239	24.7	28.1	0.88	12	1994-95
1st Grade Failures	77	7.6	6.8	1.12	26	1994-95
Failures grades 1-3 (approx. %)	112	11.6	11.3	1.03	20	1994-95
Overage for Grade 3	185	21.0	16.2	1.30	36	1995-96
Special Education (ages 8 and 9)	202	11.0	15.3	0.72	3	1995-96
School Achievement						
Special Education Grades 1 - 12	973	10.1	13.0	0.78	3	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	249	31.5	27.9	1.13	22	1995-96
Grade 8 BSAP - Math (Below standards)	345	41.7	34.8	1.20	28	1995-96
Grade 8 BSAP - Reading (Below standards)	307	37.1	28.8	1.29	34	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	317	37.4	29.5	1.27	32	1995-96
Exit Exam (Not passing all parts on 1st attempt)	257	36.9	35.3	1.05	20	1995-96
Dropout Rate	1,028	30.9	27.3	1.13	32	1992-95
25-34 Year olds with no HS Degree or GED	2,200	25.7	19.1	1.35	28	1990
Adolescent Risk Behavior						
Not in School or Employed	381	11.2	9.6	1.17	27	1990
Pregnancy (Ages 14 - 17)	93	5.6	4.8	1.17	29	1994
Alcohol Use (High School)	849	34.9	37.4	0.93	17	1992-93
Drug Use (High School)	316	13.0	12.8	1.02	32	1992-93
Binge Drinking (5 or more drinks)	397	16.3	16.3	1.00	24	1992-93
Delinquency (ages 15 - 17)	267	10.6	6.4	1.66	43	1994-95

* 1 = "best" 46 = "worst"

LANCASTER TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	68	8.2	1.24	1992	68	8.8	1.33	1993	72	8.9	1.22	1994
Births to Mothers Not Completing High School	267	32.2	1.36	1992	201	25.9	1.16	1993	207	25.5	1.17	1994
Births to Single Mothers	238	28.7	0.95	1992	196	25.2	0.83	1993	237	29.2	0.96	1994
Children in Single-Parent Families		11.3	0.78	1970		15.6	0.83	1980	3,298	25.8	1.03	1990
Economic Status												
Poor Children		18.8	0.66	1969		13.4	0.63	1979	3,046	21.1	1.00	1989
Mean Income of Families with Children					33,752	N/A	0.98	1979	34,108	N/A	1.04	1989
Health												
Less than Adequate Prenatal Care	406	49.0	1.24	1992	318	40.9	1.16	1993	183	22.5	0.70	1994
Low Birth Weight	107	12.9	1.43	1992	88	11.3	1.22	1993	95	11.7	1.27	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	185	20.5	0.77	1990-91	288	29.9	1.08	1992-93	239	24.7	0.88	1994-95
1st Grade Failures	125	14.0	1.56	1991-92	94	11.3	1.16	1992-93	77	7.6	1.12	1994-95
Failures Grades 1-3 (approx. %)	178	20.5	1.45	1991-92	132	16.4	1.15	1992-93	112	11.6	1.03	1994-95
Overage for Grade 3	252	31.4	1.21	1991-92	198	24.5	1.20	1993-94	185	21.0	1.30	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	172	20.9	1.08	1991-92	181	23.4	1.18	1993-94	249	31.5	1.13	1995-96*
Grade 8 BSAP - Math (Below Standards)	199	26.9	1.00	1991-92	223	28.2	0.91	1993-94	345	41.7	1.20	1995-96
Grade 8 BSAP - Reading (Below Standards)	173	23.5	0.96	1991-92	237	30.0	1.04	1993-94	307	37.1	1.29	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	134	19.6	0.89	1991-92	212	25.5	1.05	1993-94	317	37.4	1.27	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	229	32.6	1.05	1991-92	204	32.7	1.00	1993-94	257	36.9	1.05	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	89	5.4	1.15	1992	82	5.0	1.11	1993	93	5.6	1.17	1994
Alcohol Use (High School)	970	38.5	0.96	1989-90					849	34.9	0.93	1992-93
Drug Use (High School)	334	13.2	0.99	1989-90					316	13.0	1.02	1992-93
Binge Drinking (5 or more drinks)		15.0	0.96	1989-90					397	16.3	1.00	1992-93

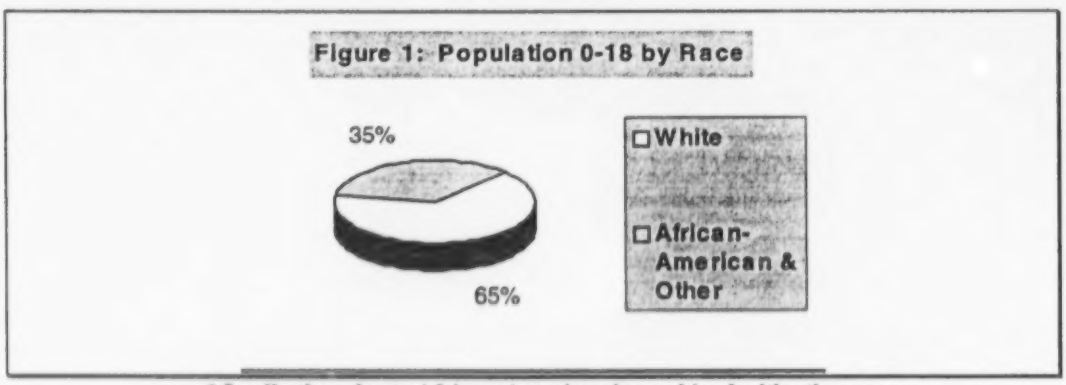
SOUTH CAROLINA kids count

1996 Report LAURENS

DEMOGRAPHICS

In 1994, there were 15,280 children under age 18 in the county. Of these, 9,980 were White and 5,300 were African-American and Other races. There were 15,024 children under age 18 in 1980, 17,237 in 1970, and 18,708 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 25.5% of the population in 1994, down from 39.3% in 1960, 34.7% in 1970 and 28.8% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 34.6% of all households in 1990, as compared with 44.0% of households in 1960, had children below the age of 18.

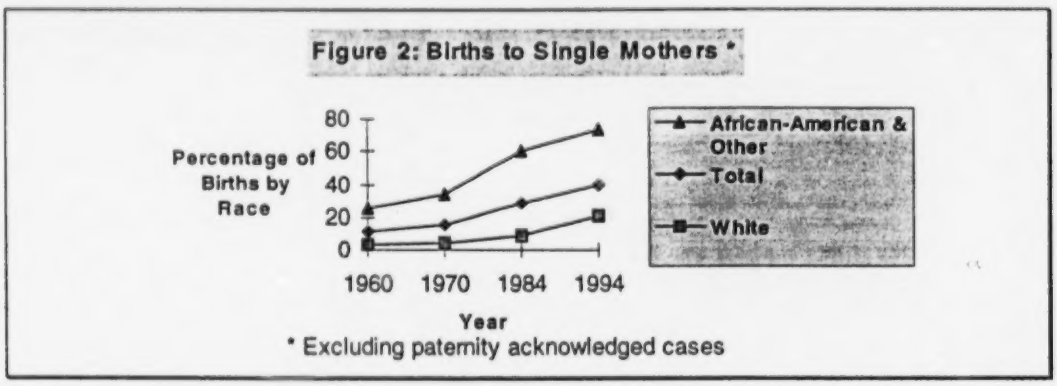
Births to Teen Mothers: In 1994, 83 babies were born to mothers younger than age 18. These babies were 10.7% of all children born in the county; 5.9% of all White babies and 19.7% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 85.5% were born to single mothers.

In 1994, 185 babies were born to mothers younger than age 20. These babies were 23.8% of all children born in the county; 19.1% of all White babies and 32.7% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 72.4% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 265 babies, 34.1% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 54.4% in 1970.

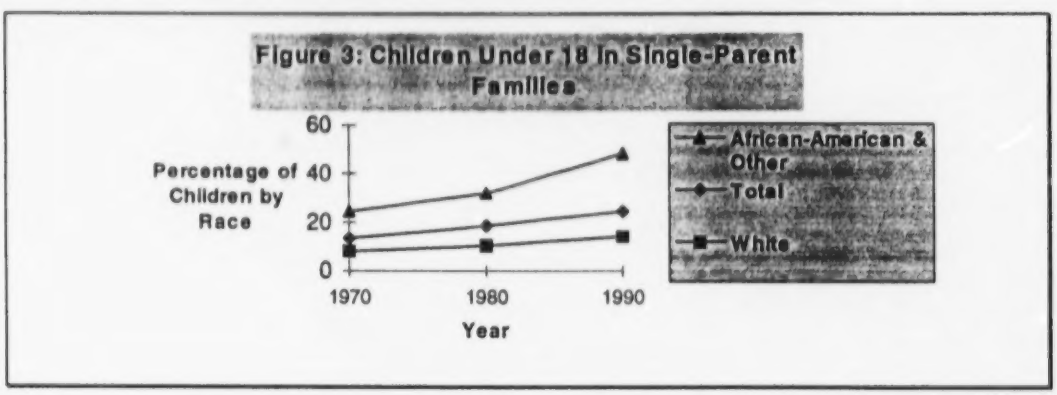
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 305 babies, 39.3% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 28.3% and in 1960 it was 11.2%. In 1994, 21.3% of White children and 73.2% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 37 babies, 4.8% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 342, constituting 44.0% of all babies, 26.8% of White babies, and 76.6% of African-American and Others.



Divorce Rate: In 1994, 501 marriage licenses were issued, while 214 divorce decrees involving 164 children were filed. In 1970 only 127 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 3,044 children lived with only one parent. This was 24.4% of all children, up from 18.2% in 1980 and 13.6% in 1970. In 1990, 14.1% of White children and 47.8% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 74.0% of mothers with children under 6 and 79.9% with children 6 - 17 were in the labor force. This has increased substantially from 46.1% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 399 children investigated as alleged child abuse and neglect victims: 28.6% for physical abuse, 9.0% for sexual abuse, 68.7% for neglect, and 9.5% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 123 children were victims of abuse and neglect: of these 55.3% were male and 44.7% were female; 52.0% were White, and 48.0% were African-American and Other. By age, 46.3% were 0 - 5, 41.5% were 6 - 12, and 12.2% were 13 - 17. They constituted 0.8% of all children age 18 or younger; 0.6% of all Whites and 1.1% of all African-Americans and Others. In the verified cases, 31.7% of abused and neglected children lived in two parent families, 35.8% in single parent families, 3.3% with extended families, and 29.3% in other circumstances.

Family Violence: In 1994, 613 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 36.0% of all assaults, which include both simple and aggravated assaults. Overall, 60.7% of all domestic assaults involve spouse abuse (constituting 21.6% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 6.1% of all children did not live with their natural parents; of these, 673 or 4.5% of children lived with relatives, 161 or 1.1% lived with non-relatives, and 64 were in institutional facilities.

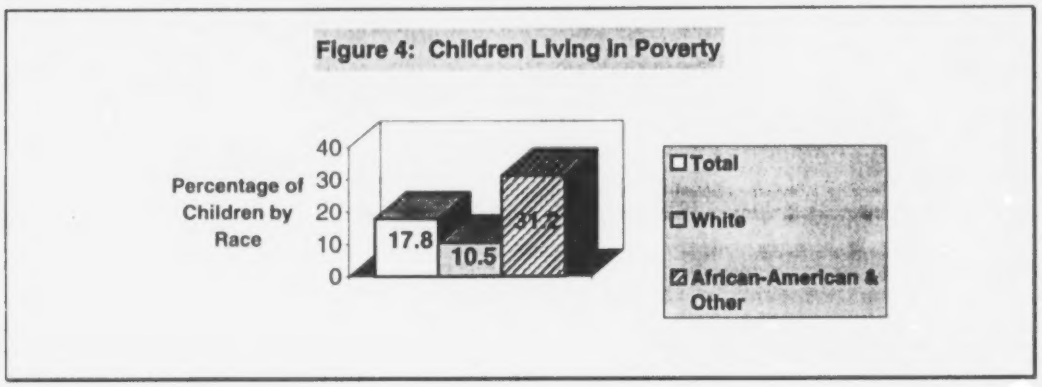
Out of Home Placements: As of September 30, 1996, 23 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 17.4% 0-2, 8.7% 3-5, 21.7% 6-10, 13.0% 11-13, and 39.1% 14 and above. The foster care population is comprised of 56.5% males and 43.5% females. Regarding their future, 30.4% were under a plan for placement in adoptive homes, 21.7% for return to a parent or guardian, 0.0% for placement with a relative, 8.7% for independent living, 26.1% for permanent foster care, and 4.3% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.93 adults for every person below age 18. This was up substantially from 1960, when there were only 1.54 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 2,612 children and youth under the age of 18 lived in families with incomes below poverty. Over 17.8% of all children and youth lived below poverty: 10.5% of Whites and 31.2% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 17.8% in 1989, it was 13.5% in 1979 and 19.8% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 21.1% of children 0 - 5 and 16.2% of children 6 - 17 lived in poverty; 19.6% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 40.8% of children in single-parent families lived in poverty, but only 8.4% of children in married-couple families were poor. Children in single-parent families made up 64.5% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 3,555 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 943 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	14,661	2,612	3,555	4,449	5,474	5,889	6,437
Percent		17.8%	24.2%	30.3%	37.3%	40.2%	43.9%
White	9,502	1,001	1,543	2,050	2,667	2,889	3,207
Percent		10.5%	16.2%	21.6%	28.1%	30.4%	33.8%
African-American and Other	5,159	1,611	2,012	2,399	2,807	3,000	3,230
Percent		31.2%	39.0%	46.5%	54.4%	58.2%	62.6%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 10.8% of households did not have a car; 6.5% of Whites and 23.4% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 12.6% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 28.8% of households had no phone.

Income: The mean income of families with children in 1989 was $33,211; in 1979, it had been $33,286, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 12.0%.

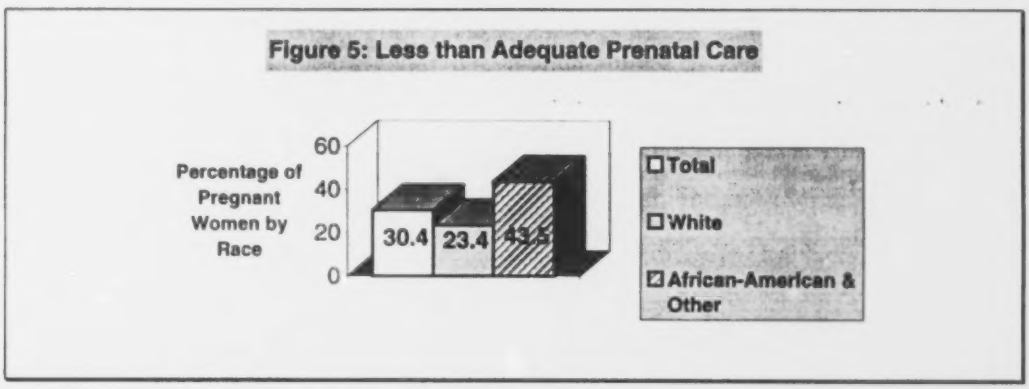
The mean income of single-parent families with children was $14,877 in 1989, as compared with $39,109 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 912 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 31.9% had child support court orders. The average monthly payment of child support was $156.28, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 505 parents in non-AFDC families were obligated to pay a monthly average of $176.53. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 178 or 22.9% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 236 or 30.4% of pregnant women received less than adequate prenatal care: 119 or 23.4% of Whites and 117 or 43.5% of African-Americans and Others. In that same year, 5 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 72 or 9.3% of all babies in the county were born with low birthweight. Over 12.6% of African-American babies and 7.5% of White babies were born with low birthweight. During 1992-94, approximately 53 or 2.2% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 3.8%. For Whites, the rate decreased by 6.9%, while for African-Americans and Others, the rate increased by 5.2%. Over the three-year period 1992-94, 16 White and 18 African-American and Other infants died before age one. By comparison, 15 White and 18 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 7 White and 11 African-American and Other children ages 1-14 died in the county. During 1982-84, 10 White and 8 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 44.0% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 10.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 642 to 963 youth ages 13-19 in the county were infected with a STD. In the county, there were 5 reported cases of children under age 15 and 73 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 11.5% first smoked by age 11, 28.2% by age 13, and 40.2% by age 15. In a typical month, 15.9% of 7th and 8th graders and 22.3% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 28.6% of White 7th to 12th graders used cigarettes, in comparison with 5.7% African-Americans. A smaller but significant group of high school students (8.5%) used smokeless tobacco monthly; it was used primarily by White males (25.2%) compared with 1.2% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 1,528 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 567 students in grades 1-12 with learning disabilities and 259 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 1,025 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 2,261 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 12 nurses; 4 are currently available.

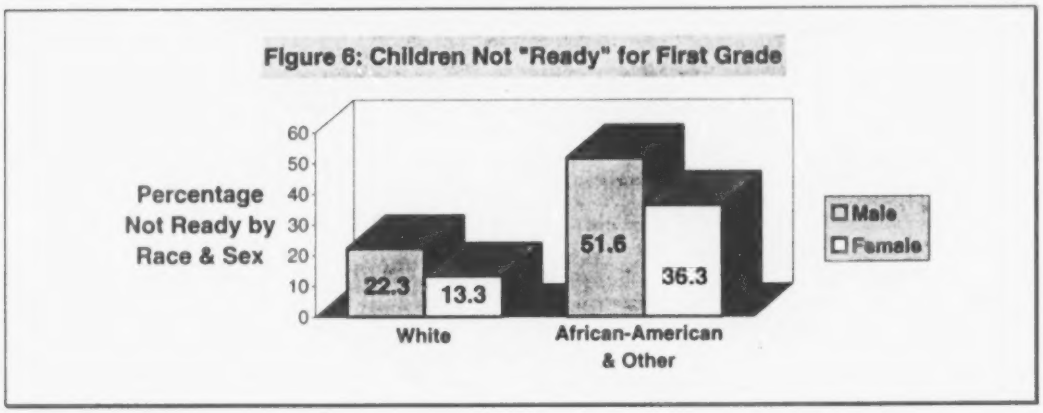
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 29.6% for Whites and 34.2% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

240 children not ready	29.3% children not ready

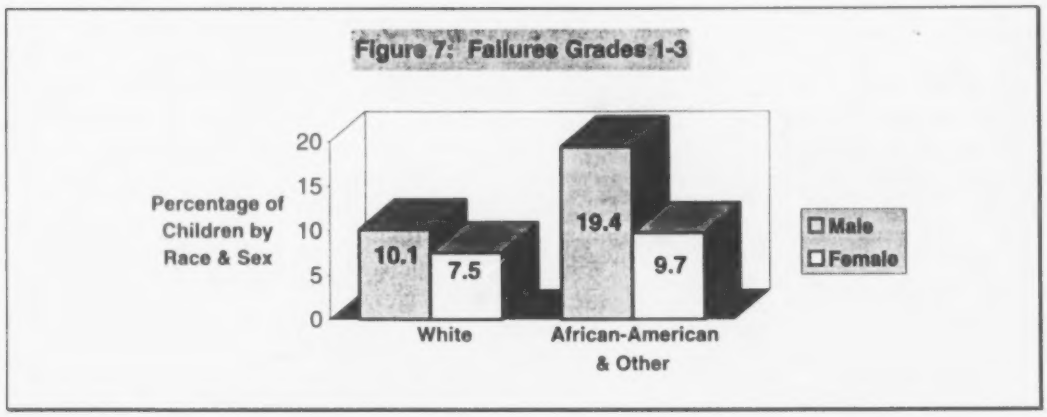


1st Grade Failures in 1995:

37 children failing	4.8% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

83 children failing	11.0% children failing



Overage for Grade 3 in 1996:

84 children overage	11.7% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 219 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 14.8% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 29.3% assessed not ready for the 1st grade, 11.7% overage in grade 3, and 14.8% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

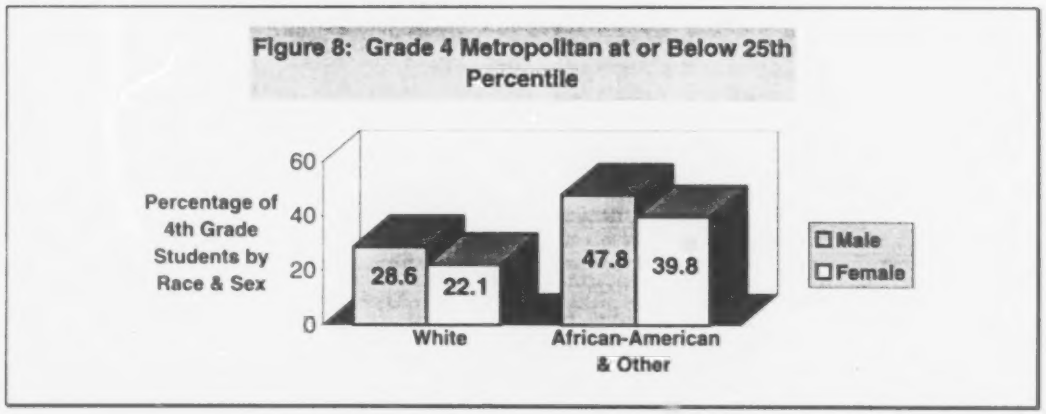
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 259 speech and language impaired, 567 learning disabled, 16 emotionally disabled, 260 mentally impaired, and 77 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 14.5% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996
(i.e. below 75% of students nationwide)

198 children at or below 25th percentile	32.5% children at or below 25th percentile



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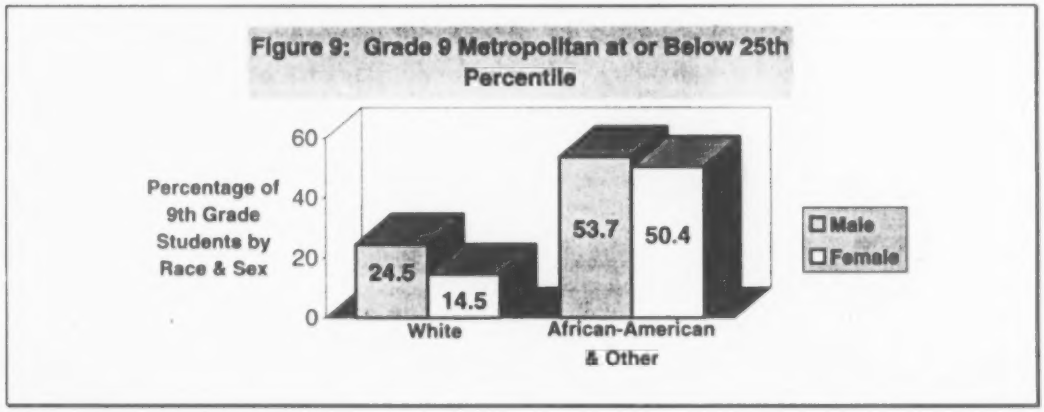
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	282	40.1	257	36.5
White Males	77	31.3	83	33.7
White Females	68	34.0	45	22.5
African-American & Other Males	70	56.0	62	49.6
African-American & Other Females	66	50.0	66	50.0

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

210 students at or below 25th percentile

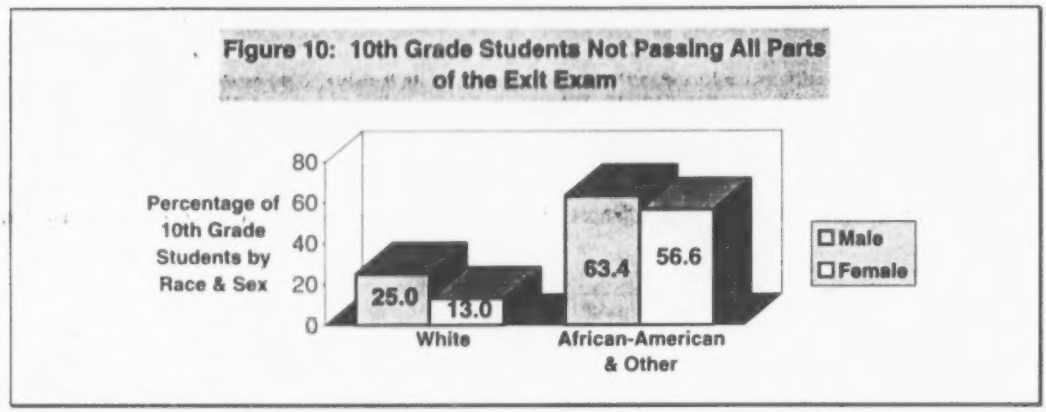
32.6% students at or below 25th percentile



Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

175 students not passing all parts

32.8% students not passing all parts

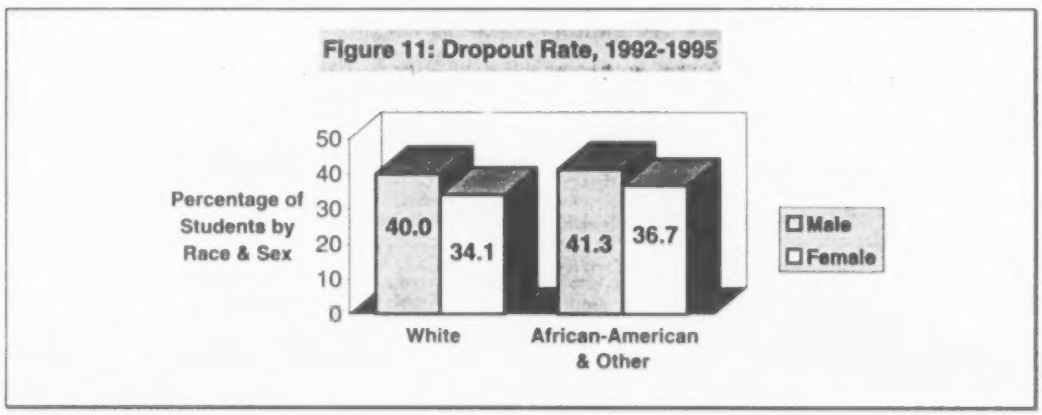


Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 58.0% to 27.4% in math and from 55.1% to 24.2% in reading. During the 1990s the trend altered, with 40.1% not meeting 8th grade math standards in 1996 and 36.5% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 33.7% in 1983 on the CTBS, 33.2% in 1990 on the Stanford, and 36.5% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 30.2% in 1990 and 29.6% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

1,135 students drop out

38.0% students drop out



Dropouts: A distressing number of students drop out and fail to graduate. An average 38.9% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 36.2% during 1985-89, and 38.4% during 1990-94. During the 1995-96 period, 92.1% of all who did graduate received the State High School Diploma, while 2.2% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 5.7% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 32 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 139 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 32.4% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 32.5% to 40.1%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 544 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 13.6% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

11.6%	White Males	15.1%	African-American & Other Males
13.6%	White Females	16.8%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 87 girls between the ages of 14 and 17 became pregnant in 1993 and 98 in 1994. In 1994, this represented 5.5% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 3.5% for Whites and 9.5% for African-Americans and others. Of all pregnancies to 14-17 year olds, 82.7% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 33.7%.

Alcohol Use: In 1992-93, 20.2% of 7th and 8th graders and 38.2% of high schoolers said they had used alcohol in the past month. Of White males, 34.2% had used it in the past month, compared with 35.3% of African-American males; likewise, 31.2% of White females said they had used alcohol, compared with 21.2% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 13.0% had used alcohol by age 11 or younger, 33.1% by age 13, and 56.6% by age 15.

During the previous year, 36.1% of 7th and 8th graders and 43.9% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 29.1% said they had driven after drinking, and 8.5% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 56.7% of eighth graders and 88.0% of seniors felt that beer was easy to get; 48.9% of eighth graders and 46.7% of seniors felt there was not a great risk in using it regularly.

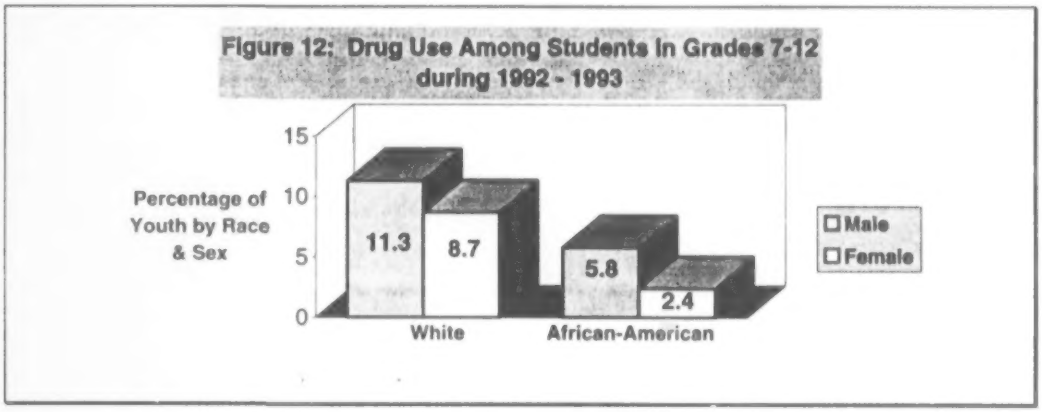
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthiy has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 27.7% of all high school students in 1992-93 responded 3 or more drinks at a time; 16.3% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 5.3% of 7th and 8th graders and 9.3% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (11.3%) and White females (8.7%); use among African-American males was 5.8%; African-American females, 2.4%. Some young people first used drugs at an early age: among students 15 and older, 2.5% experienced their first use by age 11 or sooner; 7.4% had used a drug by age 13, and 13.9% by age 15.

Of seniors who had initiated use of marijuana, 6.0% had started use at home, 50.5% at a friend's home, and 43.5% elsewhere. During the past year, 2.0% of all high school students said that they used marijuana at home, 7.6% at a friend's house, and 4.2% in a car. In the past year, 4.9% of all high school students who drive and 7.3% of seniors who drive said that they had driven after using drugs . Furthermore, 3.2% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 24.8% of 8th graders who had an opinion said it is easy to get marijuana and 20.0% said it is easy to get cocaine or crack; 71.8% of seniors who had an opinion said it is easy to get marijuana and 64.2% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 15.1% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 265 individual juvenile offenders in the county were referred to the Solicitor; of these, 12.5% were age 12 or youpger, 33.2% were 13 or 14, and 54.3% were 15 or older.

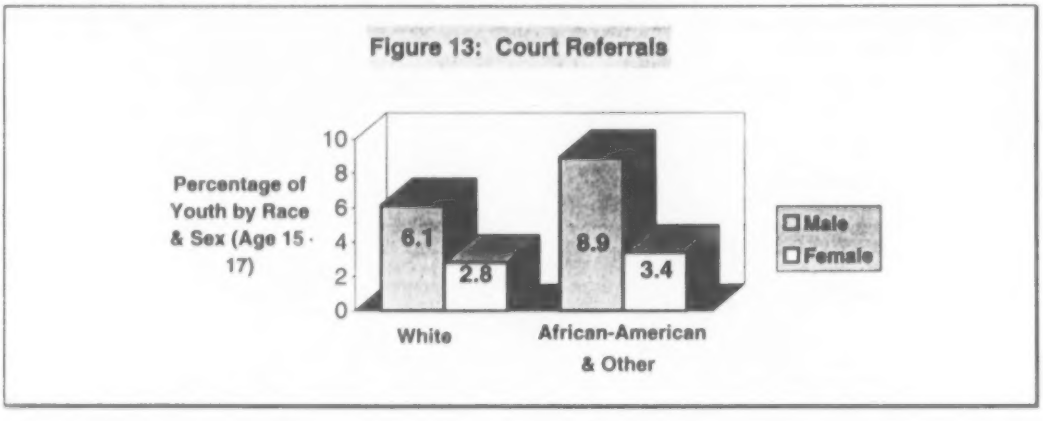
Of the referrals to the family court, 17.0% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 51 juvenile cases constituting 15.7% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 27.9% lived in families with income under $10,000, 34.9% with $10,000-$19,999 and 37.1% with $20,000 or more. Furthermore, only 27.3% of delinquents lived with both natural parents, while 45.5% lived in a single parent household and 27.3% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 35.4% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 28.7% had at least one prior referral and 10.2% had been referred to court 3 times or more.

In 1994-95, there were 21 juvenile commitments from the county to State institutions.

During 1994-95, 144 youth ages 15 to 17 were referred to the family courts. In the county, 5.1% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 16 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 7 deaths between 1990 and 1994; homicides killed 5 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 24.4% of children in single-parent families, 17.8% in poverty, 38.0% dropping out of school, 38.2% of high school students using alcohol and 15.1% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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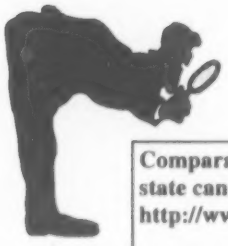
-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.



Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

LAURENS

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	83	10.7	7.3	1.47	37	1994
Births to Mothers Not Completing High School	265	34.1	21.8	1.56	44	1994
Births to Single Mothers	305	39.3	30.4	1.29	26	1994
Children in Single-Parent Families	3,044	24.4	25.1	0.97	15	1990
Parents Working	5,119	78.0	74.3	1.05	38	1990
Abuse & Neglect Victims	123	0.8	1.0	0.80	12	1995-96
Separation from Parents	898	6.1	5.1	1.20	30	1990
Economic Status						
Poor Children	2,612	17.8	21.0	0.85	12	1989
Mean Income of Families with Children	$33,211	NA	NA	0.93	19	1989
Health						
Less than Adequate Prenatal Care	236	30.4	32.0	0.95	17	1994
Low Birth Weight	72	9.3	9.2	1.01	21	1994
Not Adequately Immunized	107	10.0	18.0	0.56	15	1995
Cigarette Smokers (High School)	439	22.3	23.1	0.97	26	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	240	29.3	28.1	1.04	27	1994-95
1st Grade Failures	37	4.8	6.8	0.71	11	1994-95
Failures grades 1-3 (approx. %)	83	11.0	11.3	0.97	19	1994-95
Overage for Grade 3	84	11.7	16.2	0.72	8	1995-96
Special Education (ages 8 and 9)	219	14.8	15.3	0.97	22	1995-96
School Achievement						
Special Education Grades 1 - 12	1,179	14.5	13.0	1.12	33	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	198	32.5	27.9	1.16	25	1995-96
Grade 8 BSAP - Math (Below standards)	282	40.1	34.8	1.15	27	1995-96
Grade 8 BSAP - Reading (Below standards)	257	36.5	28.8	1.27	32	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	210	32.6	29.5	1.11	22	1995-96
Exit Exam (Not passing all parts on 1st attempt)	175	32.8	35.3	0.93	13	1995-96
Dropout Rate	1,135	38.0	27.3	1.39	40	1992-95
25-34 Year olds with no HS Degree or GED	2,774	32.4	19.1	1.70	44	1990
Adolescent Risk Behavior						
Not in School or Employed	544	13.6	9.6	1.42	39	1990
Pregnancy (Ages 14 - 17)	98	5.5	4.8	1.15	28	1994
Alcohol Use (High School)	752	38.2	37.4	1.02	30	1992-93
Drug Use (High School)	183	9.3	12.8	0.73	24	1992-93
Binge Drinking (5 or more drinks)	321	16.3	16.3	1.00	24	1992-93
Delinquency (ages 15 - 17)	144	5.1	6.4	0.80	13	1994-95

* 1 = "best" 46 = "worst"

LAURENS TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	70	8.6	1.30	1992	72	8.7	1.32	1993	83	10.7	1.47	1994
Births to Mothers Not Completing High School	285	35.1	1.49	1992	244	29.4	1.31	1993	265	34.1	1.56	1994
Births to Single Mothers	297	36.6	1.21	1992	288	34.7	1.15	1993	305	39.3	1.29	1994
Children in Single-Parent Families		13.6	0.94	1970		18.2	0.96	1980	3,044	24.4	0.97	1990
Economic Status												
Poor Children		19.8	0.69	1969		13.5	0.64	1979	2,612	17.8	0.85	1989
Mean Income of Families with Children					33,286	N/A	0.99	1979	33,211	N/A	1.07	1989
Health												
Less than Adequate Prenatal Care	235	29.0	0.73	1992	217	26.1	0.74	1993	236	30.4	0.95	1994
Low Birth Weight	67	8.3	0.92	1992	82	9.9	1.06	1993	72	9.3	1.01	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	202	25.1	0.94	1990-91	213	28.0	1.01	1992-93	240	29.3	1.04	1994-95
1st Grade Failures	79	10.3	1.14	1991-92	37	5.2	0.54	1992-93	37	4.8	0.71	1994-95
Failures Grades 1-3 (approx. %)	116	15.7	1.11	1991-92	72	10.8	0.76	1992-93	83	11.0	0.97	1994-95
Overage for Grade 3	192	27.8	1.07	1991-92	168	22.2	1.08	1993-94	84	11.7	0.72	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	125	18.6	0.96	1991-92	132	20.2	1.02	1993-94	198	32.5	1.16	1995-96*
Grade 8 BSAP - Math (Below Standards)	169	27.5	1.02	1991-92	228	32.5	1.05	1993-94	282	40.1	1.15	1995-96
Grade 8 BSAP - Reading (Below Standards)	191	31.1	1.27	1991-92	255	36.3	1.26	1993-94	257	36.5	1.27	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	154	24.5	1.12	1991-92	141	23.4	0.96	1993-94	210	32.6	1.11	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	143	26.6	0.86	1991-92	172	38.0	1.16	1993-94	175	32.8	0.93	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	86	4.9	1.04	1992	87	4.9	1.09	1993	98	5.5	1.15	1994
Alcohol Use (High School)	1,008	43.3	1.08	1989-90					752	38.2	1.02	1992-93
Drug Use (High School)	296	12.7	0.95	1989-90					183	9.3	0.73	1992-93
Binge Drinking (5 or more drinks)		17.8	1.14	1989-90					321	16.3	1.00	1992-93

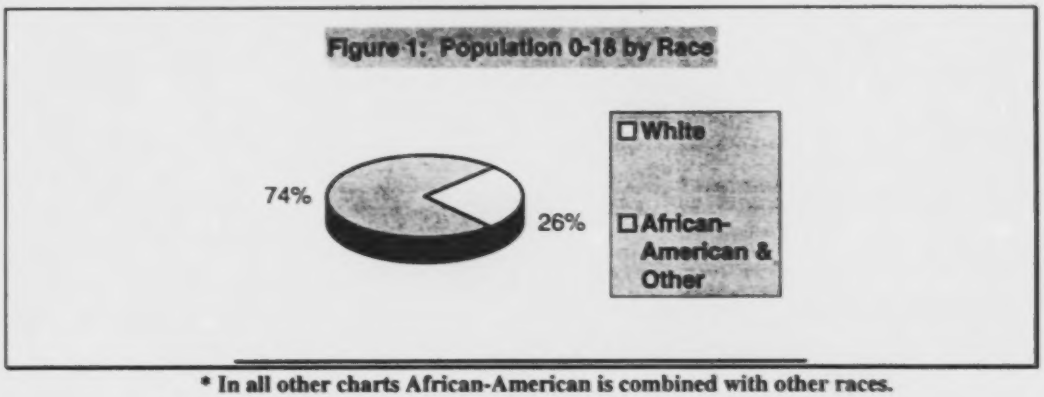
SOUTH CAROLINA kids count

1996 Report LEE

DEMOGRAPHICS

In 1994, there were 5,680 children under age 18 in the county. Of these, 1,470 were White and 4,220 were African-American and Other races. There were 6,611 children under age 18 in 1980, 8,121 in 1970, and 10,925 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 30.4% of the population in 1994, down from 50.0% in 1960, 44.3% in 1970 and 34.9% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 37.6% of all households in 1990, as compared with 49.0% of households in 1960, had children below the age of 18.

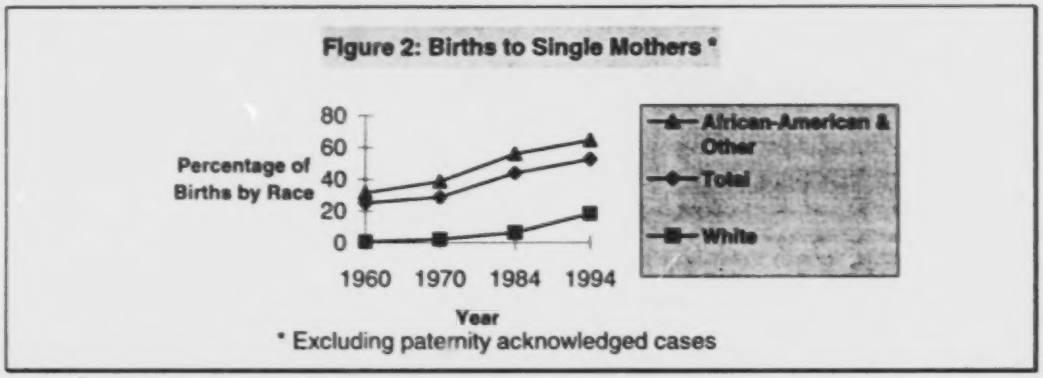
Births to Teen Mothers: In 1994, 25 babies were born to mothers younger than age 18. These babies were 9.7% of all children born in the county; 4.5% of all White babies and 11.5% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 88.0% were born to single mothers.

In 1994, 50 babies were born to mothers younger than age 20. These babies were 19.5% of all children born in the county; 9.1% of all White babies and 23.0% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 88.0% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 62 babies, 24.1% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 59.9% in 1970.

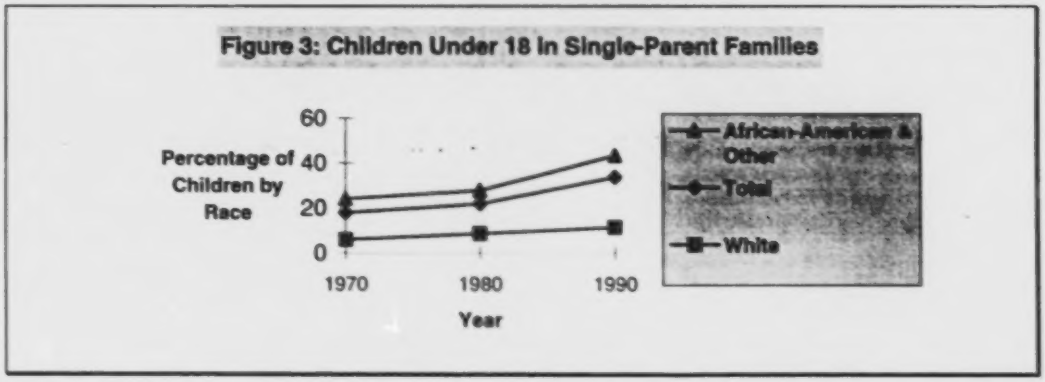
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 135 babies, 52.5% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 43.8% and in 1960 it was 25.1%. In 1994, 18.2% of White children and 64.4% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 4 babies, 1.6% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 139, constituting 54.1% of all babies, 18.2% of White babies, and 66.5% of African-American and Others.



Divorce Rate: In 1994, 144 marriage licenses were issued, while 54 divorce decrees involving 42 children were filed. In 1970 only 17 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 1,506 children lived with only one parent. This was 33.7% of all children, up from 21.8% in 1980 and 17.8% in 1970. In 1990, 11.4% of White children and 43.3% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 62.2% of mothers with children under 6 and 77.7% with children 6 - 17 were in the labor force. This has increased substantially from 28.5% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 161 children investigated as alleged child abuse and neglect victims: 19.9% for physical abuse, 11.8% for sexual abuse, 65.2% for neglect, and 21.7% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 47 children were victims of abuse and neglect: of these 44.7% were male and 55.3% were female; 19.1% were White, and 80.9% were African-American and Other. By age, 48.9% were 0 - 5, 25.5% were 6 - 12, and 25.5% were 13 - 17. They constituted 0.8% of all children age 18 or younger; 0.6% of all Whites and 0.9% of all African-Americans and Others. In the verified cases, 29.8% of abused and neglected children lived in two parent families, 36.2% in single parent families, 21.3% with extended families, and 12.8% in other circumstances.

Family Violence: In 1994, 99 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 36.0% of all assaults, which include both simple and aggravated assaults. Overall, 52.5% of all domestic assaults involve spouse abuse (constituting 18.9% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 7.6% of all children did not live with their natural parents; of these, 379 or 6.7% of children lived with relatives, 51 or 0.9% lived with non-relatives, and 0 were in institutional facilities.

Out of Home Placements: As of September 30, 1996, 40 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 22.5% 0-2, 7.5% 3-5, 32.5% 6-10, 12.5% 11-13, and 25.0% 14 and above. The foster care population is comprised of 50.0% males and 50.0% females. Regarding their future, 17.5% were under a plan for placement in adoptive homes, 45.0% for return to a parent or guardian, 15.0% for placement with a relative, 10.0% for independent living, 10.0% for permanent foster care, and 2.5% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.29 adults for every person below age 18. This was up substantially from 1960, when there were only 1 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 2,182 children and youth under the age of 18 lived in families with incomes below poverty. Over 38.6% of all children and youth lived below poverty: 3.2% of Whites and 50.8% of African-Americans and others.

Figure 4: Children Living in Poverty

Poverty has always been a serious problem. While the rate among children under age 18 was 38.6% in 1989, it was 38.7% in 1979 and 57.7% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 42.5% of children 0 - 5 and 36.9% of children 6 - 17 lived in poverty; 32.0% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 65.8% of children in single-parent families lived in poverty, but only 20.3% of children in married-couple families were poor. Children in single-parent families made up 67.6% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 2,590 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 408 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	5,653	2,182	2,590	3,173	3,537	3,665	3,744
Percent		38.6%	45.8%	56.1%	62.6%	64.8%	66.2%
White	1,452	46	103	243	337	375	395
Percent		3.2%	7.1%	16.7%	23.2%	25.8%	27.2%
African-American and Other	4,201	2,136	2,487	2,930	3,200	3,290	3,349
Percent		50.8%	59.2%	69.7%	76.2%	78.3%	79.7%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 16.0% of households did not have a car; 5.8% of Whites and 24.2% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 19.1% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 36.0% of households had no phone.

Income: The mean income of families with children in 1989 was $25,380; in 1979, it had been $28,715, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 12.9%.

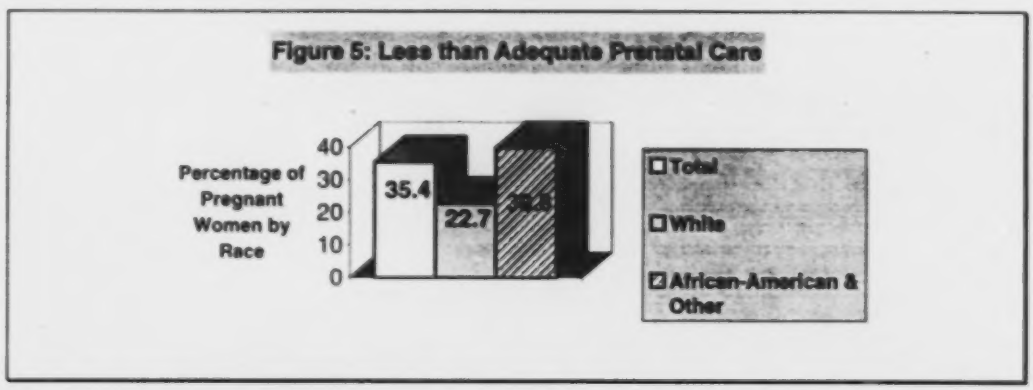
The mean income of single-parent families with children was $13,216 in 1989, as compared with $31,599 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 626 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 51.9% had child support court orders. The average monthly payment of child support was $145.71, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 155 parents in non-AFDC families were obligated to pay a monthly average of $148.09. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 75 or 29.2% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 91 or 35.4% of pregnant women received less than adequate prenatal care: 15 or 22.7% of Whites and 76 or 39.8% of African-Americans and Others. In that same year, 3 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 39 or 15.2% of all babies in the county were born with low birthweight. Over 17.3% of African-American babies and 9.1% of White babies were born with low birthweight. During 1992-94, approximately 16 or 2.0% of all babies were born with very low birthweight.

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Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 55.0%. For Whites, the rate decreased by 100.0%, while for African-Americans and Others, the rate decreased by 47.3%. Over the three-year period 1992-94, 0 White and 10 African-American and Other infants died before age one. By comparison, 4 White and 21 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 0 White and 6 African-American and Other children ages 1-14 died in the county. During 1982-84, 0 White and 3 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 40.5% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 8.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 218 to 327 youth ages 13-19 in the county were infected with a STD. In the county, there were 3 reported cases of children under age 15 and 24 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 10.1% first smoked by age 11, 20.7% by age 13, and 30.5% by age 15. In a typical month, 8.8% of 7th and 8th graders and 13.7% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 27.2% of White 7th to 12th graders used cigarettes, in comparison with 7.0% African-Americans. A smaller but significant group of high school students (3.1%) used smokeless tobacco monthly; it was used primarily by White males (17.5%) compared with 1.1% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 568 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 74 students in grades 1-12 with learning disabilities and 130 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 389 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 841 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 5 nurses; 2 are currently available.

Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 45.3% for Whites and 45.0% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

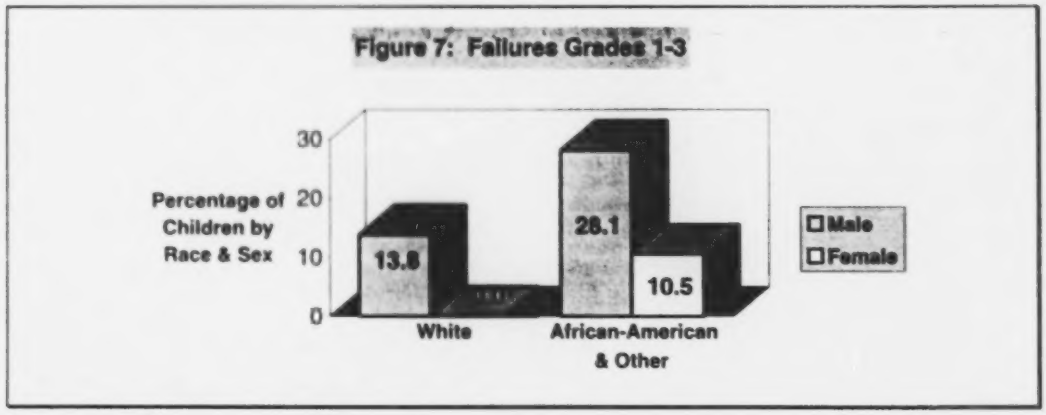
111 children not ready	**37.4% children not ready**

1st Grade Failures in 1995:

33 children failing	**11.3% children failing**

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

53 children failing	**19.0% children failing**



Overage for Grade 3 in 1996:

51 children overage	23.3% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 56 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 11.2% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 37.4% assessed not ready for the 1st grade, 23.3% overage in grade 3, and 11.2% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

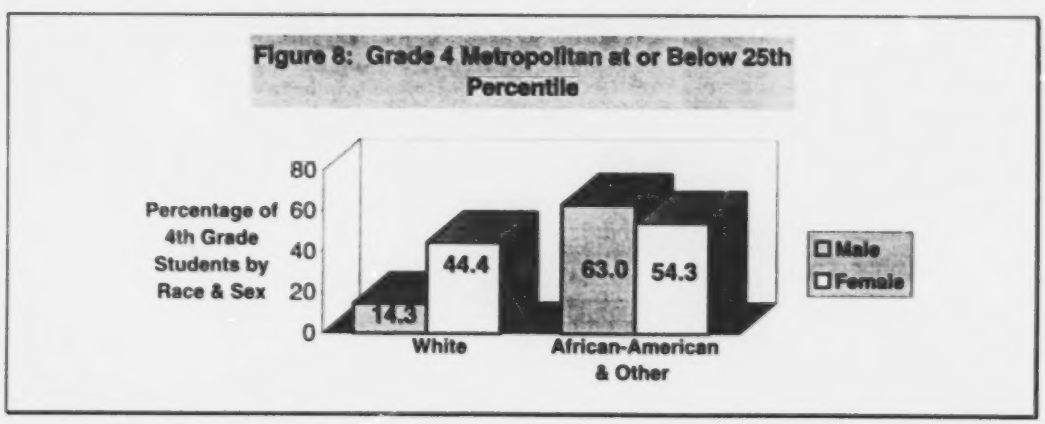
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 130 speech and language impaired, 74 learning disabled, 8 emotionally disabled, 120 mentally impaired, and 13 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 11.3% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

158 children at or below 25th percentile	56.2% children at or below 25th percentile



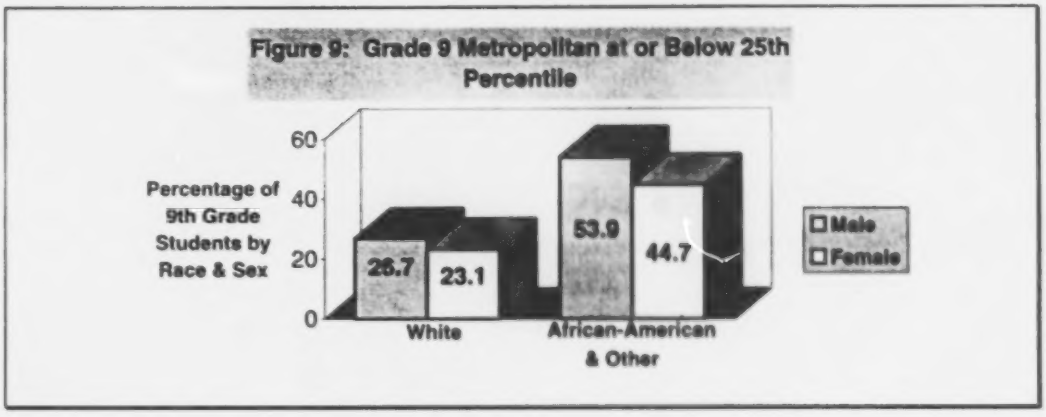
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	126	52.7	118	50.2
White Males	6	30.0	4	20.0
White Females	3	37.5	2	33.3
African-American & Other Males	55	52.4	52	51.0
African-American & Other Females	62	58.5	60	56.1

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

143 students at or below 25th percentile

46.7% students at or below 25th percentile



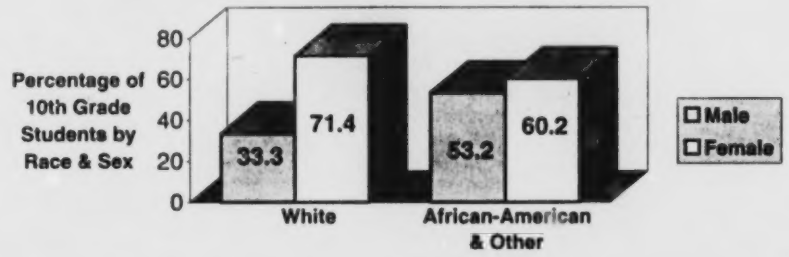
Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

95 students not passing all parts

57.6% students not passing all parts

587

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



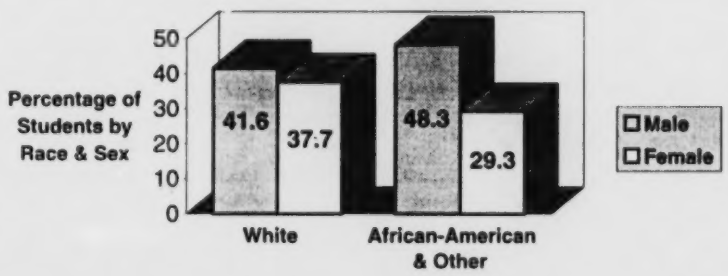
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 81.4% to 48.3% in math and from 73.9% to 36.7% in reading. During the 1990s the trend altered, with 52.7% not meeting 8th grade math standards in 1996 and 50.2% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 51.2% in 1983 on the CTBS, 55.2% in 1990 on the Stanford, and 61.0% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 51.6% in 1990 and 55.7% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

464 students drop out

38.8% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 26.2% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 33.6% during 1985-89, and 35.5% during 1990-94. During the 1995-96 period, 93.4% of all who did graduate received the State High School Diploma, while 6.6% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 0.0% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 13 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 20 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 25.3% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 38.8% to 57.6%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 206 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 16.7% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

3.9%	White Males	10.4%	African-American & Other Males
27.4%	White Females	23.1%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 29 girls between the ages of 14 and 17 became pregnant in 1993 and 31 in 1994. In 1994, this represented 5.0% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 2.0% for Whites and 6.0% for African-Americans and others. Of all pregnancies to 14-17 year olds, 80.6% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it increased by 3.3%.

Alcohol Use: In 1992-93, 25.8% of 7th and 8th graders and 30.9% of high schoolers said they had used alcohol in the past month. Of White males, 31.7% had used it in the past month, compared with 37.6% of African-American males; likewise, 29.5% of White females said they had used alcohol, compared with 21.1% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 13.8% had used alcohol by age 11 or younger, 28.0% by age 13, and 50.5% by age 15.

During the previous year, 37.8% of 7th and 8th graders and 42.4% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 28.5% said they had driven after drinking, and 13.9% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 59.0% of eighth graders and 81.1% of seniors felt that beer was easy to get; 57.2% of eighth graders and 46.9% of seniors felt there was not a great risk in using it regularly.

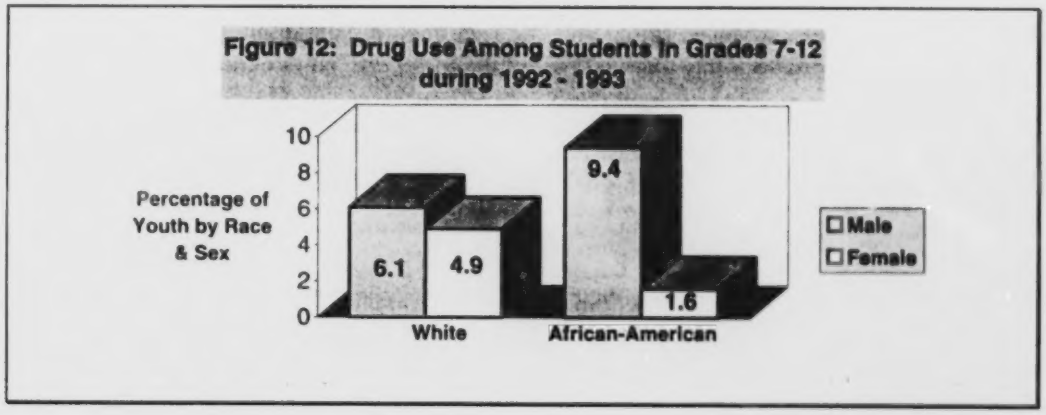
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 20.0% of all high school students in 1992-93 responded 3 or more drinks at a time; 10.8% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 4.5% of 7th and 8th graders and 5.6% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (6.1%) and White females (4.9%); use among African-American males was 9.4%; African-American females, 1.6%. Some young people first used drugs at an early age: among students 15 and older, 1.6% experienced their first use by age 11 or sooner; 4.2% had used a drug by age 13, and 9.7% by age 15.

Of seniors who had initiated use of marijuana, 7.4% had started use at home, 34.8% at a friend's home, and 57.8% elsewhere. During the past year, 0.5% of all high school students said that they used marijuana at home, 3.0% at a friend's house, and 1.9% in a car. In the past year, 3.5% of all high school students who drive and 4.1% of seniors who drive said that they had driven after using drugs . Furthermore, 4.6% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 19.2% of 8th graders who had an opinion said it is easy to get marijuana and 15.6% said it is easy to get cocaine or crack; 63.1% of seniors who had an opinion said it is easy to get marijuana and 59.1% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 9.1% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 88 individual juvenile offenders in the county were referred to the Solicitor; of these, 12.5% were age 12 or younger, 30.7% were 13 or 14, and 56.8% were 15 or older.

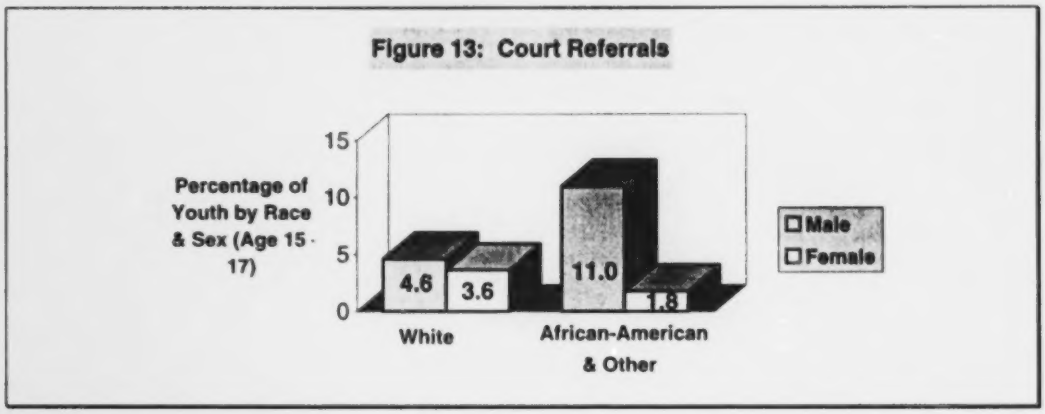
Of the referrals to the family court, 20.0% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 43 juvenile cases constituting 47.8% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 73.3% lived in families with income under $10,000, 18.7% with $10,000-$19,999 and 8.0% with $20,000 or more. Furthermore, only 15.8% of delinquents lived with both natural parents, while 64.5% lived in a single parent household and 19.7% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 27.6% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 39.8% had at least one prior referral and 12.5% had been referred to court 3 times or more.

In 1994-95, there were 3 juvenile commitments from the county to State institutions.

During 1994-95, 50 youth ages 15 to 17 were referred to the family courts. In the county, 5.6% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 8 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 6 deaths between 1990 and 1994; homicides killed 0 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 33.7% of children in single-parent families, 38.6% in poverty, 38.8% dropping out of school, 30.9% of high school students using alcohol and 9.1% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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-or-
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SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
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Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

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SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

LEE

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	25	9.7	7.3	1.33	31	1994
Births to Mothers Not Completing High School	62	24.1	21.8	1.11	20	1994
Births to Single Mothers	135	52.5	30.4	1.73	44	1994
Children in Single-Parent Families	1,506	33.7	25.1	1.34	40	1990
Parents Working	1,520	72.7	74.3	0.98	14	1990
Abuse & Neglect Victims	47	0.8	1.0	0.80	12	1995-96
Separation from Parents	430	7.6	5.1	1.49	40	1990
Economic Status						
Poor Children	2,182	38.6	21.0	1.84	44	1989
Mean Income of Families with Children	$25,380	NA	NA	0.71	45	1989
Health						
Less than Adequate Prenatal Care	91	35.4	32.0	1.11	29	1994
Low Birth Weight	39	15.2	9.2	1.65	45	1994
Not Adequately Immunized	29	8.0	18.0	0.44	10	1995
Cigarette Smokers (High School)	137	13.7	23.1	0.59	7	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	111	37.4	28.1	1.33	42	1994-95
1st Grade Failures	33	11.3	6.8	1.66	35	1994-95
Failures grades 1-3 (approx. %)	53	19.0	11.3	1.68	36	1994-95
Overage for Grade 3	51	23.3	16.2	1.44	41	1995-96
Special Education (ages 8 and 9)	56	11.2	15.3	0.73	4	1995-96
School Achievement						
Special Education Grades 1 - 12	345	11.3	13.0	0.87	8	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	158	56.2	27.9	2.01	46	1995-96
Grade 8 BSAP - Math (Below standards)	126	52.7	34.8	1.51	44	1995-96
Grade 8 BSAP - Reading (Below standards)	118	50.2	28.8	1.74	44	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	143	46.7	29.5	1.58	41	1995-96
Exit Exam (Not passing all parts on 1st attempt)	95	57.6	35.3	1.63	43	1995-96
Dropout Rate	464	38.8	27.3	1.42	42	1992-95
25-34 Year olds with no HS Degree or GED	740	25.3	19.1	1.32	27	1990
Adolescent Risk Behavior						
Not in School or Employed	206	16.7	9.6	1.74	44	1990
Pregnancy (Ages 14 - 17)	31	5.0	4.8	1.04	17	1994
Alcohol Use (High School)	310	30.9	37.4	0.83	4	1992-93
Drug Use (High School)	56	5.6	12.8	0.44	7	1992-93
Binge Drinking (5 or more drinks)	108	10.8	16.3	0.66	4	1992-93
Delinquency (ages 15 - 17)	50	5.6	6.4	0.88	19	1994-95

* 1 = "best" 46 = "worst"

LEE TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	21	6.9	1.05	1992	22	8.8	1.33	1993	25	9.7	1.33	1994
Births to Mothers Not Completing High School	77	25.2	1.07	1992	67	26.7	1.19	1993	62	24.1	1.11	1994
Births to Single Mothers	160	52.5	1.73	1992	129	51.4	1.70	1993	135	52.5	1.73	1994
Children in Single-Parent Families		17.8	1.23	1970		21.8	1.15	1980	1,506	33.7	1.34	1990
Economic Status												
Poor Children		57.7	2.01	1969		38.7	1.83	1979	2,182	38.6	1.84	1989
Mean Income of Families with Children					28,715	N/A	1.15	1979	25,380	N/A	1.40	1989
Health												
Less than Adequate Prenatal Care	148	48.5	1.23	1992	105	41.8	1.18	1993	91	35.4	1.11	1994
Low Birth Weight	33	10.8	1.20	1992	36	14.3	1.54	1993	39	15.2	1.65	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	123	38.9	1.46	1990-91	106	39.0	1.40	1992-93	111	37.4	1.33	1994-95
1st Grade Failures	40	12.8	1.42	1991-92	50	17.5	1.80	1992-93	33	11.3	1.66	1994-95
Failures Grades 1-3 (approx. %)	66	21.6	1.53	1991-92	92	33.1	2.31	1992-93	53	19.0	1.68	1994-95
Overage for Grade 3	82	27.4	1.06	1991-92	77	29.3	1.43	1993-94	51	23.3	1.44	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	126	41.0	2.12	1991-92	132	47.3	2.39	1993-94	158	56.2	2.01	1995-96*
Grade 8 BSAP - Math (Below Standards)	93	31.5	1.17	1991-92	121	48.0	1.55	1993-94	126	52.7	1.51	1995-96
Grade 8 BSAP - Reading (Below Standards)	111	37.5	1.54	1991-92	132	52.2	1.81	1993-94	118	50.2	1.74	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	122	41.4	1.89	1991-92	135	50.6	2.08	1993-94	143	46.7	1.58	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	88	48.9	1.57	1991-92	106	53.5	1.64	1993-94	95	57.6	1.63	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	29	4.7	1.00	1992	29	4.8	1.07	1993	31	5.0	1.04	1994
Alcohol Use (High School)	234	29.4	0.73	1989-90					310	30.9	0.83	1992-93
Drug Use (High School)	56	7.0	0.52	1989-90					56	5.6	0.44	1992-93
Binge Drinking (5 or more drinks)		7.7	0.49	1989-90					108	10.8	0.66	1992-93

SOUTH CAROLINA kids count

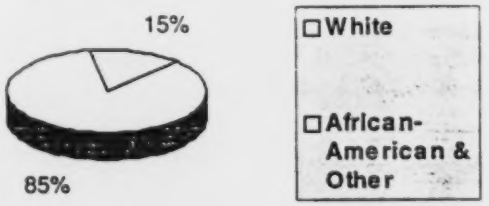
1996 Report LEXINGTON

DEMOGRAPHICS

In 1994, there were 49,010 children under age 18 in the county. Of these, 41,550 were White and 7,470 were African-American and Other races. There were 43,423 children under age 18 in 1980, 33,132 in 1970, and 24,588 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 26.2% of the population in 1994, down from 40.5% in 1960, 37.2% in 1970 and 30.9% in 1980.

Figure 1: Population 0-18 by Race



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 39.0% of all households in 1990, as compared with 53.0% of households in 1960, had children below the age of 18.

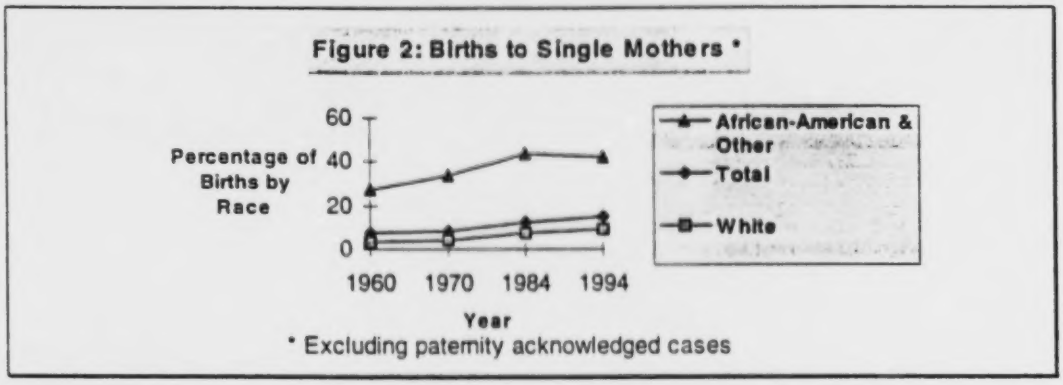
Births to Teen Mothers: In 1994, 105 babies were born to mothers younger than age 18. These babies were 3.8% of all children born in the county; 3.1% of all White babies and 7.0% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 54.3% were born to single mothers.

In 1994, 292 babies were born to mothers younger than age 20. These babies were 10.5% of all children born in the county; 8.7% of all White babies and 18.5% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 46.2% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 412 babies, 14.8% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 33.4% in 1970.

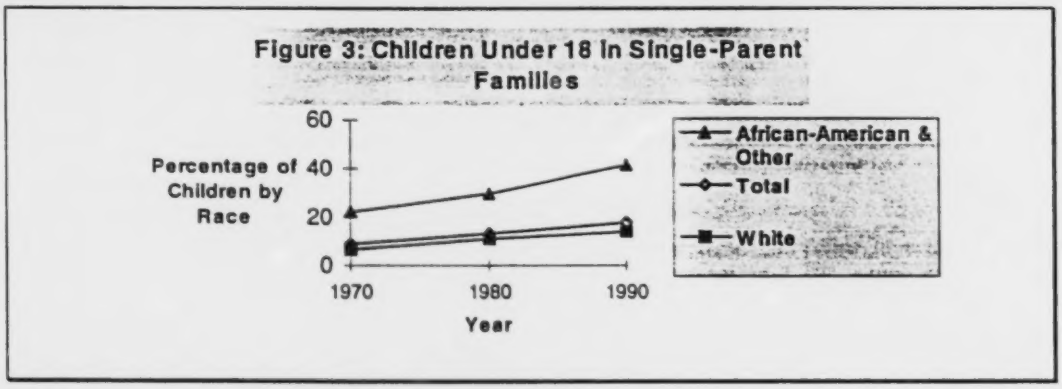
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 417 babies, 15.0% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 12.6% and in 1960 it was 7.8%. In 1994, 9.0% of White children and 42.0% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 255 babies, 9.1% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 672, constituting 24.1% of all babies, 17.5% of White babies, and 54.4% of African-American and Others.



Divorce Rate: In 1994, 1,391 marriage licenses were issued, while 959 divorce decrees involving 767 children were filed. In 1970 only 297 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 7,346 children lived with only one parent. This was 17.9% of all children, up from 13.6% in 1980 and 8.8% in 1970. In 1990, 14.2% of White children and 41.6% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 71.3% of mothers with children under 6 and 80.8% with children 6 - 17 were in the labor force. This has increased substantially from 39.2% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

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Abuse and Neglect: In 1995-96, there were 2,331 children investigated as alleged child abuse and neglect victims: 37.2% for physical abuse, 9.4% for sexual abuse, 73.0% for neglect, and 25.2% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 466 children were victims of abuse and neglect: of these 47.9% were male and 52.1% were female; 75.1% were White, and 24.9% were African-American and Other. By age, 46.6% were 0 - 5, 36.1% were 6 - 12, and 17.4% were 13 - 17. They constituted 0.9% of all children age 18 or younger; 0.8% of all Whites and 1.5% of all African-Americans and Others. In the verified cases, 30.9% of abused and neglected children lived in two parent families, 40.6% in single parent families, 4.9% with extended families, and 23.6% in other circumstances.

Family Violence: In 1994, 1,628 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 38.0% of all assaults, which include both simple and aggravated assaults. Overall, 69.5% of all domestic assaults involve spouse abuse (constituting 26.6% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 3.7% of all children did not live with their natural parents; of these, 946 or 2.1% of children lived with relatives, 586 or 1.3% lived with non-relatives, and 106 were in institutional facilities.

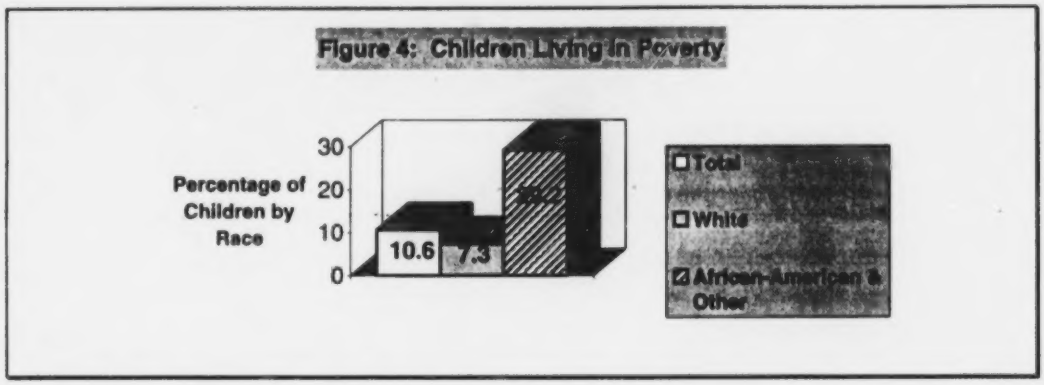
Out of Home Placements: As of September 30, 1996, 95 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 16.8% 0-2, 13.7% 3-5, 32.6% 6-10, 11.6% 11-13, and 25.3% 14 and above. The foster care population is comprised of 50.5% males and 49.5% females. Regarding their future, 12.6% were under a plan for placement in adoptive homes, 64.2% for return to a parent or guardian, 4.2% for placement with a relative, 6.3% for independent living, 12.6% for permanent foster care, and 0.0% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.82 adults for every person below age 18. This was up substantially from 1960, when there were only 1.47 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 4,647 children and youth under the age of 18 lived in families with incomes below poverty. Over 10.6% of all children and youth lived below poverty: 7.3% of Whites and 29.2% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 10.6% in 1989, it was 11.1% in 1979 and 16.4% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 11.8% of children 0 - 5 and 10.0% of children 6 - 17 lived in poverty; 14.3% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 29.1% of children in single-parent families lived in poverty, but only 5.8% of children in married-couple families were poor. Children in single-parent families made up 54.1% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 6,190 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 1,543 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	43,910	4,647	6,190	8,094	10,644	11,428	13,031
Percent		10.6%	14.1%	18.4%	24.2%	26.0%	29.7%
White	37,362	2,735	3,717	5,096	7,153	7,846	9,261
Percent		7.3%	9.9%	13.6%	19.1%	21.0%	24.8%
African-American and Other	6,548	1,912	2,473	2,998	3,491	3,582	3,770
Percent		29.2%	37.8%	45.8%	53.3%	54.7%	57.6%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 5.0% of households did not have a car; 3.6% of Whites and 16.7% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 4.7% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 11.6% of households had no phone.

Income: The mean income of families with children in 1989 was $42,480; in 1979, it had been $38,924, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 3.1%.

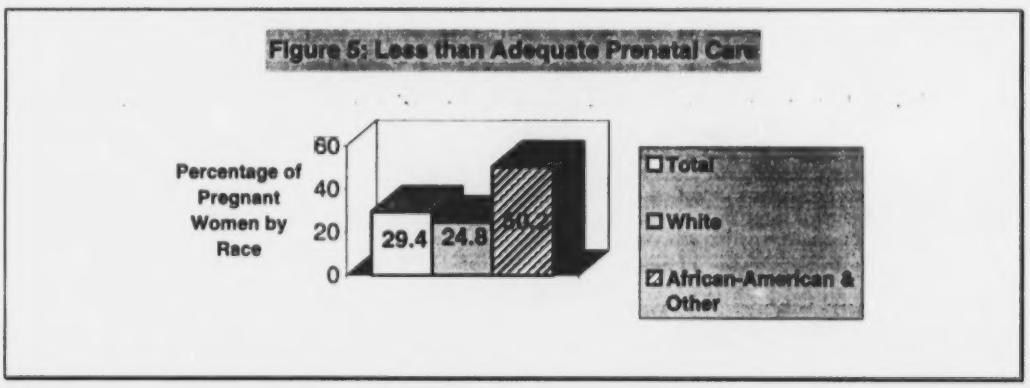
The mean income of single-parent families with children was $21,454 in 1989, as compared with $47,513 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 1,410 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 25.5% had child support court orders. The average monthly payment of child support was $159.23, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 773 parents in non-AFDC families were obligated to pay a monthly average of $207.09. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 633 or 22.7% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 819 or 29.4% of pregnant women received less than adequate prenatal care: 566 or 24.8% of Whites and 253 or 50.2% of African-Americans and Others. In that same year, 72 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 196 or 7.0% of all babies in the county were born with low birthweight. Over 12.5% of African-American babies and 5.8% of White babies were born with low birthweight. During 1992-94, approximately 119 or 1.4% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 35.7%. For Whites, the rate decreased by 31.8%, while for African-Americans and Others, the rate decreased by 47.8%. Over the three-year period 1992-94, 43 White and 19 African-American and Other infants died before age one. By comparison, 50 White and 24 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 30 White and 9 African-American and Other children ages 1-14 died in the county. During 1982-84, 26 White and 8 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 58.3% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 22.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 1,868 to 2,802 youth ages 13-19 in the county were infected with a STD. In the county, there were 9 reported cases of children under age 15 and 65 youth ages 15 - 19 infected with gonorrhea; 2 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 14.8% first smoked by age 11, 35.6% by age 13, and 50.4% by age 15. In a typical month, 16.1% of 7th and 8th graders and 28.8% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 27.1% of White 7th to 12th graders used cigarettes, in comparison with 6.6% African-Americans. A smaller but significant group of high school students (10.6%) used smokeless tobacco monthly; it was used primarily by White males (23.3%) compared with 1.2% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 4,901 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 2,187 students in grades 1-12 with learning disabilities and 1,440 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 3,243 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 7,253 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 53 nurses; 44 are currently available.

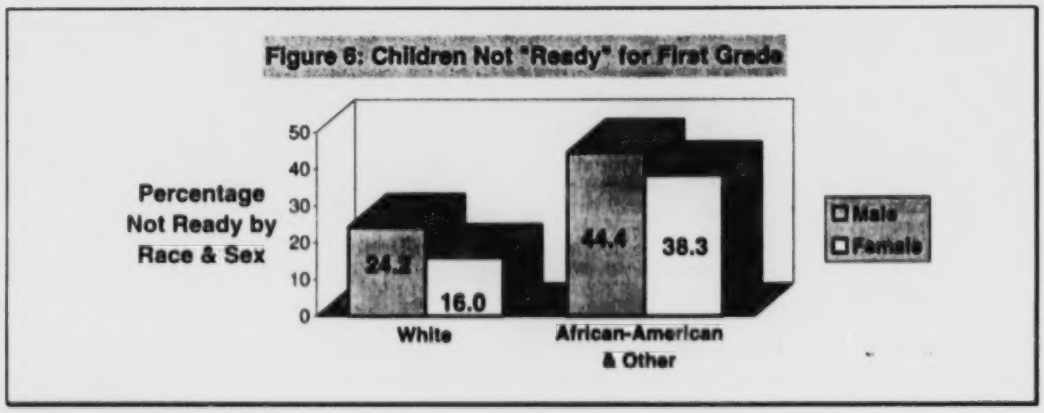
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 25.4% for Whites and 34.9% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

842 children not ready	**24.5% children not ready**

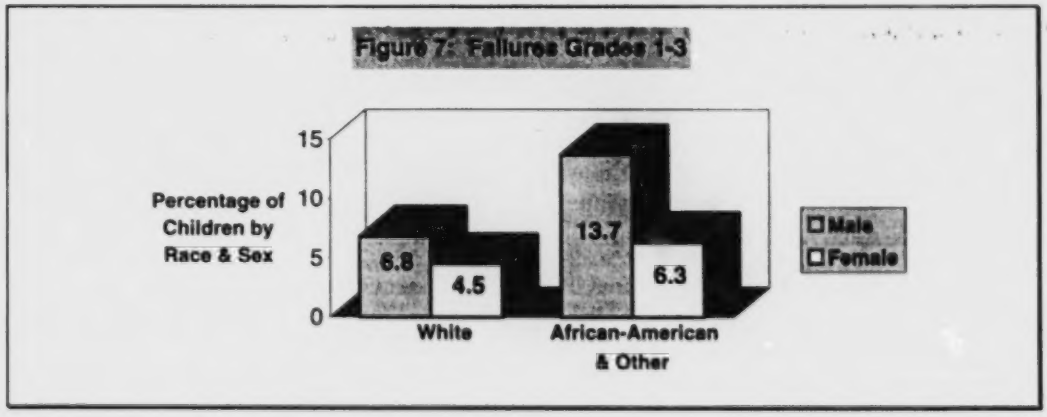


1st Grade Failures in 1995:

161 children failing	**4.7% children failing**

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

218 children failing	**6.5% children failing**



Overage for Grade 3 in 1996:

412 children overage	13.2% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 1,039 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 16.1% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 24.5% assessed not ready for the 1st grade, 13.2% overage in grade 3, and 16.1% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

SCHOOL ACHIEVEMENT

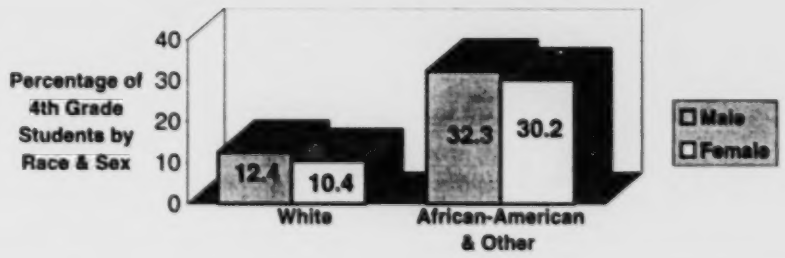
By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 1,440 speech and language impaired, 2,187 learning disabled, 354 emotionally disabled, 515 mentally impaired, and 275 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 12.9% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

463 children at or below 25th percentile	14.9% children at or below 25th percentile

Figure 8: Grade 4 Metropolitan at or Below 25th Percentile



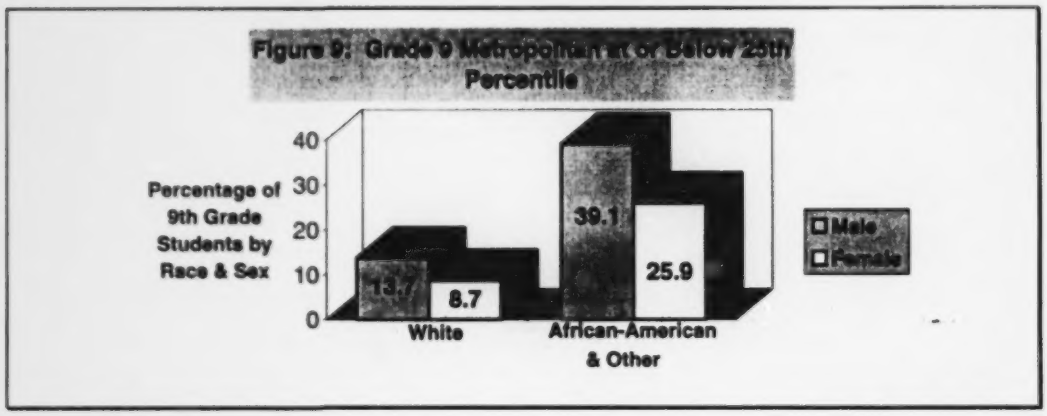
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	605	19.7	482	15.7
White Males	202	16.2	193	15.6
White Females	217	16.4	145	11.0
African-American & Other Males	84	36.7	71	31.3
African-American & Other Females	99	36.0	70	25.5

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

470 students at or below 25th percentile

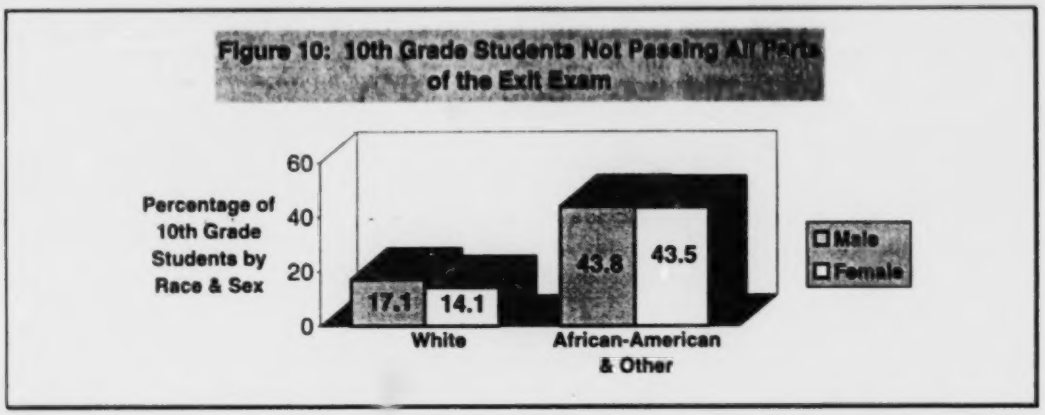
15.0% students at or below 25th percentile



Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

541 students not passing all parts

20.1% students not passing all parts

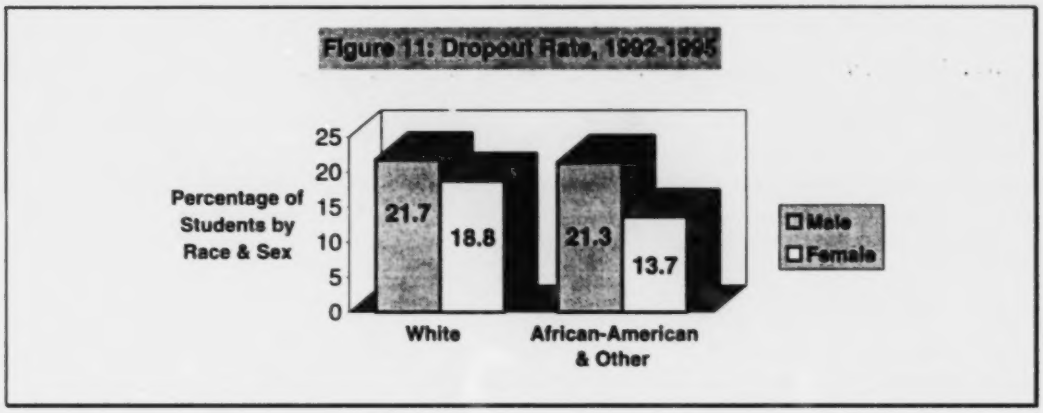


Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 38.3% to 16.8% in math and from 28.4% to 15.5% in reading. During the 1990s the trend altered, with 19.7% not meeting 8th grade math standards in 1996 and 15.7% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 17.1% in 1983 on the CTBS, 22.2% in 1990 on the Stanford, and 17.4% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 22.4% in 1990 and 15.7% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

2,325 students drop out

19.9% students drop out



Dropouts: A distressing number of students drop out and fail to graduate. An average 25.8% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 22.5% during 1985-89, and 22.4% during 1990-94. During the 1995-96 period, 97.6% of all who did graduate received the State High School Diploma, while 1.1% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 1.3% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 137 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 233 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 13.8% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 14.9% to 20.1%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 911 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 8.8% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

5.9%	White Males	16.1%	African-American & Other Males
9.8%	White Females	14.9%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 160 girls between the ages of 14 and 17 became pregnant in 1993 and 157 in 1994. In 1994, this represented 3.0% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 2.4% for Whites and 7.0% for African-Americans and others. Of all pregnancies to 14-17 year olds, 66.2% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 27.4%.

Alcohol Use: In 1992-93, 20.2% of 7th and 8th graders and 42.0% of high schoolers said they had used alcohol in the past month. Of White males, 37.3% had used it in the past month, compared with 28.6% of African-American males; likewise, 33.1% of White females said they had used alcohol, compared with 23.2% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 18.7% had used alcohol by age 11 or younger, 41.4% by age 13, and 65.3% by age 15.

During the previous year, 31.0% of 7th and 8th graders and 41.5% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 31.2% said they had driven after drinking, and 8.1% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 62.2% of eighth graders and 90.0% of seniors felt that beer was easy to get; 53.2% of eighth graders and 53.6% of seniors felt there was not a great risk in using it regularly.

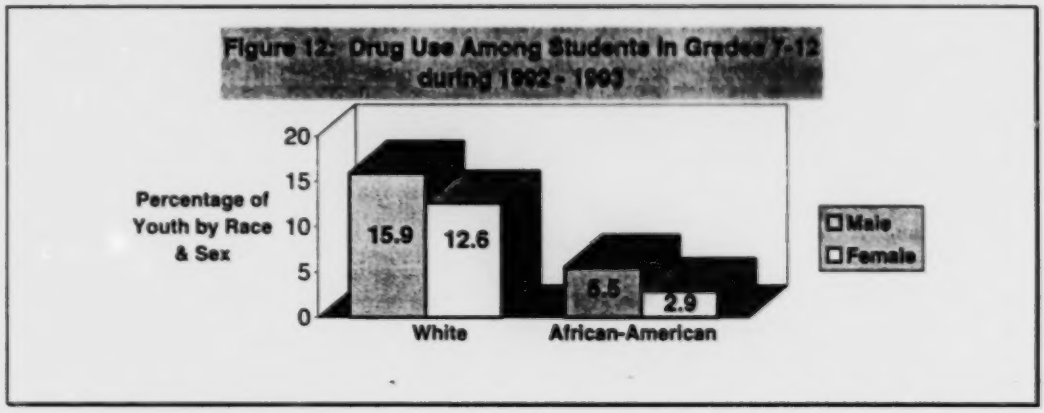
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 34.3% of all high school students in 1992-93 responded 3 or more drinks at a time; 20.4% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 6.0% of 7th and 8th graders and 16.7% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (15.9%) and White females (12.6%); use among African-American males was 5.5%; African-American females, 2.9%. Some young people first used drugs at an early age: among students 15 and older, 3.5% experienced their first use by age 11 or sooner; 11.3% had used a drug by age 13, and 23.9% by age 15.

Of seniors who had initiated use of marijuana, 10.7% had started use at home, 46.0% at a friend's home, and 43.3% elsewhere. During the past year, 6.1% of all high school students said that they used marijuana at home, 13.5% at a friend's house, and 8.5% in a car. In the past year, 9.3% of all high school students who drive and 16.4% of seniors who drive said that they had driven after using drugs . Furthermore, 11.1% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 25.3% of 8th graders who had an opinion said it is easy to get marijuana and 15.5% said it is easy to get cocaine or crack; 77.9% of seniors who had an opinion said it is easy to get marijuana and 54.4% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 27.1% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 781 individual juvenile offenders in the county were referred to the Solicitor; of these, 14.2% were age 12 or younger, 31.4% were 13 or 14, and 54.3% were 15 or older.

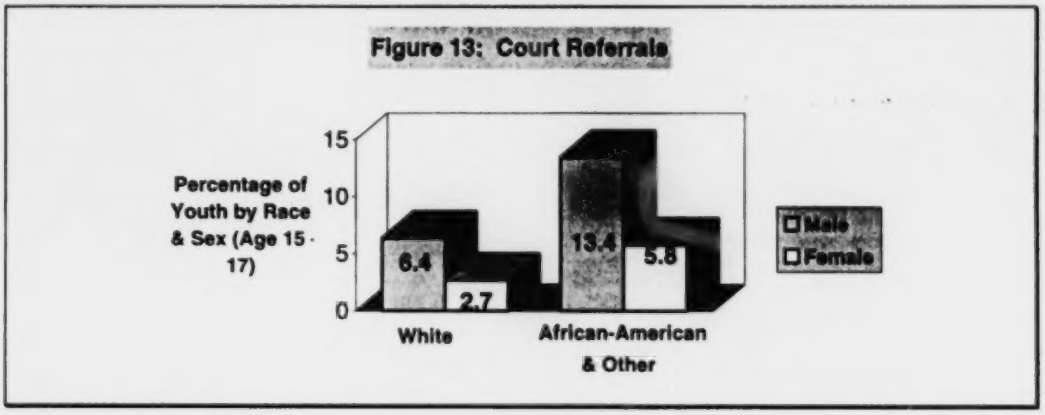
Of the referrals to the family court, 7.6% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 151 juvenile cases constituting 13.3% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 24.7% lived in families with income under $10,000, 25.1% with $10,000-$19,999 and 50.2% with $20,000 or more. Furthermore, only 23.6% of delinquents lived with both natural parents, while 42.4% lived in a single parent household and 33.9% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 32.2% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 25.6% had at least one prior referral and 9.6% had been referred to court 3 times or more.

In 1994-95, there were 43 juvenile commitments from the county to State institutions.

During 1994-95, 422 youth ages 15 to 17 were referred to the family courts. In the county, 5.3% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 68 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 29 deaths between 1990 and 1994; homicides killed 7 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 17.9% of children in single-parent families, 10.6% in poverty, 19.9% dropping out of school, 42.0% of high school students using alcohol and 27.1% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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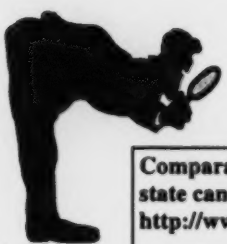
-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.



Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

LEXINGTON

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	105	3.8	7.3	0.52	1	1994
Births to Mothers Not Completing High School	412	14.8	21.8	0.68	2	1994
Births to Single Mothers	417	15.0	30.4	0.49	1	1994
Children in Single-Parent Families	7,346	17.9	25.1	0.71	3	1990
Parents Working	15,517	77.8	74.3	1.05	36	1990
Abuse & Neglect Victims	466	0.9	1.0	0.90	16	1995-96
Separation from Parents	1,638	3.7	5.1	0.73	5	1990
Economic Status						
Poor Children	4,647	10.6	21.0	0.50	1	1989
Mean Income of Families with Children	$42,480	NA	NA	1.19	1	1989
Health						
Less than Adequate Prenatal Care	819	29.4	32.0	0.92	16	1994
Low Birth Weight	196	7.0	9.2	0.76	6	1994
Not Adequately Immunized	624	22.0	18.0	1.22	41	1995
Cigarette Smokers (High School)	2,666	28.8	23.1	1.25	44	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	842	24.5	28.1	0.87	10	1994-95
1st Grade Failures	161	4.7	6.8	0.69	10	1994-95
Failures grades 1-3 (approx. %)	218	6.5	11.3	0.58	5	1994-95
Overage for Grade 3	412	13.2	16.2	0.81	11	1995-96
Special Education (ages 8 and 9)	1,039	16.1	15.3	1.05	27	1995-96
School Achievement						
Special Education Grades 1 - 12	4,771	12.9	13.0	0.99	18	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	463	14.9	27.9	0.53	1	1995-96
Grade 8 BSAP - Math (Below standards)	605	19.7	34.8	0.57	1	1995-96
Grade 8 BSAP - Reading (Below standards)	482	15.7	28.8	0.55	1	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	470	15.0	29.5	0.51	1	1995-96
Exit Exam (Not passing all parts on 1st attempt)	541	20.1	35.3	0.57	1	1995-96
Dropout Rate	2,325	19.9	27.3	0.73	3	1992-95
25-34 Year olds with no HS Degree or GED	4,099	13.8	19.1	0.72	3	1990
Adolescent Risk Behavior						
Not in School or Employed	911	8.8	9.6	0.92	10	1990
Pregnancy (Ages 14 - 17)	157	3.0	4.8	0.63	1	1994
Alcohol Use (High School)	3,888	42.0	37.4	1.12	43	1992-93
Drug Use (High School)	1,546	16.7	12.8	1.30	45	1992-93
Binge Drinking (5 or more drinks)	1,888	20.4	16.3	1.25	44	1992-93
Delinquency (ages 15 - 17)	422	5.3	6.4	0.83	16	1994-95

* 1 = "best" 46 = "worst"

LEXINGTON TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	123	4.4	0.67	1992	113	4.2	0.64	1993	105	3.8	0.52	1994
Births to Mothers Not Completing High School	529	18.9	0.80	1992	416	15.4	0.69	1993	412	14.8	0.68	1994
Births to Single Mothers	460	16.4	0.54	1992	458	17.0	0.56	1993	417	15.0	0.49	1994
Children in Single-Parent Families		8.8	0.61	1970		13.6	0.72	1980	7,346	17.9	0.71	1990
Economic Status												
Poor Children		16.4	0.57	1969		11.1	0.52	1979	4,647	10.6	0.50	1989
Mean Income of Families with Children					38,924	N/A	0.85	1979	42,480	N/A	0.84	1989
Health												
Less than Adequate Prenatal Care	1,107	39.6	1.00	1992	907	33.6	0.95	1993	819	29.4	0.92	1994
Low Birth Weight	197	7.0	0.78	1992	216	8.0	0.86	1993	196	7.0	0.76	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	642	19.9	0.75	1990-91	700	21.5	0.77	1992-93	842	24.5	0.87	1994-95
1st Grade Failures	148	4.7	0.52	1991-92	134	4.8	0.49	1992-93	161	4.7	0.69	1994-95
Failures Grades 1-3 (approx. %)	212	6.8	0.48	1991-92	200	7.2	0.50	1992-93	218	6.5	0.58	1994-95
Overage for Grade 3	500	16.5	0.64	1991-92	401	13.5	0.66	1993-94	412	13.2	0.81	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	343	12.2	0.63	1991-92	331	11.0	0.56	1993-94	463	14.9	0.53	1995-96*
Grade 8 BSAP - Math (Below Standards)	500	18.6	0.69	1991-92	580	19.3	0.62	1993-94	605	19.7	0.57	1995-96
Grade 8 BSAP - Reading (Below Standards)	454	16.9	0.69	1991-92	477	15.9	0.55	1993-94	482	15.7	0.55	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	292	12.9	0.59	1991-92	352	11.9	0.49	1993-94	470	15.0	0.51	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	498	20.7	0.67	1991-92	481	19.7	0.60	1993-94	541	20.1	0.57	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	182	3.7	0.79	1992	160	3.2	0.71	1993	157	3.0	0.63	1994
Alcohol Use (High School)	4,527	47.6	1.18	1989-90					3,888	42.0	1.12	1992-93
Drug Use (High School)	1,743	18.3	1.37	1989-90					1,546	16.7	1.30	1992-93
Binge Drinking (5 or more drinks)		19.7	1.26	1989-90					1,888	20.4	1.25	1992-93

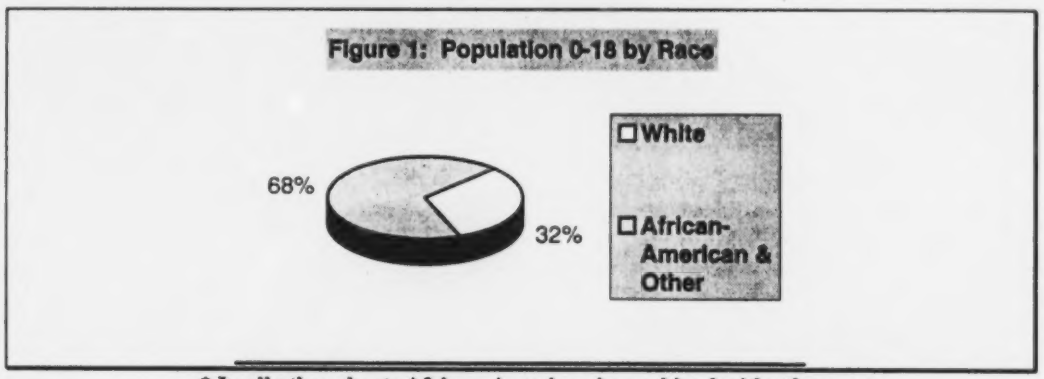
SOUTH CAROLINA kids count

1996 Report MCCORMICK

DEMOGRAPHICS

In 1994, there were 2,180 children under age 18 in the county. Of these, 690 were White and 1,500 were African-American and Other races. There were 2,568 children under age 18 in 1980, 3,353 in 1970, and 4,077 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 24.0% of the population in 1994, down from 47.2% in 1960, 42.1% in 1970 and 32.9% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 33.0% of all households in 1990, as compared with 47.0% of households in 1960, had children below the age of 18.

Births to Teen Mothers: In 1994, 12 babies were born to mothers younger than age 18. These babies were 11.7% of all children born in the county; 3.7% of all White babies and 14.5% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 100.0% were born to single mothers.

In 1994, 22 babies were born to mothers younger than age 20. These babies were 21.4% of all children born in the county; 14.8% of all White babies and 23.7% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 95.5% were born to single mothers.

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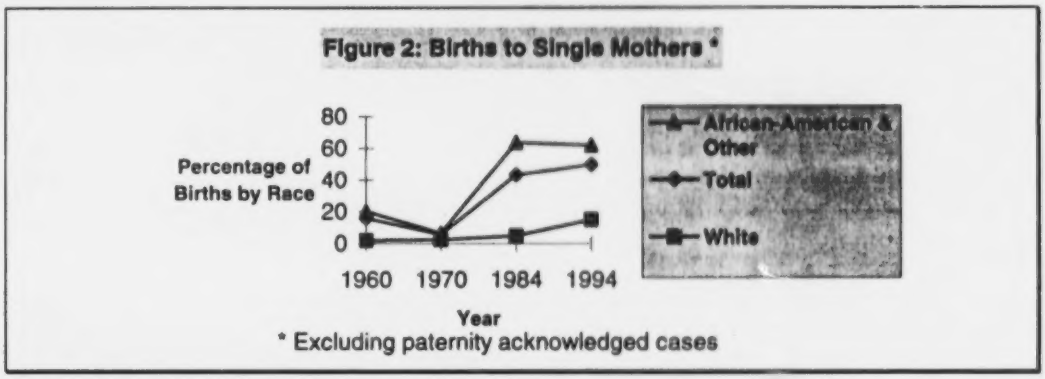
Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 25 babies, 24.3% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 39.8% in 1970.

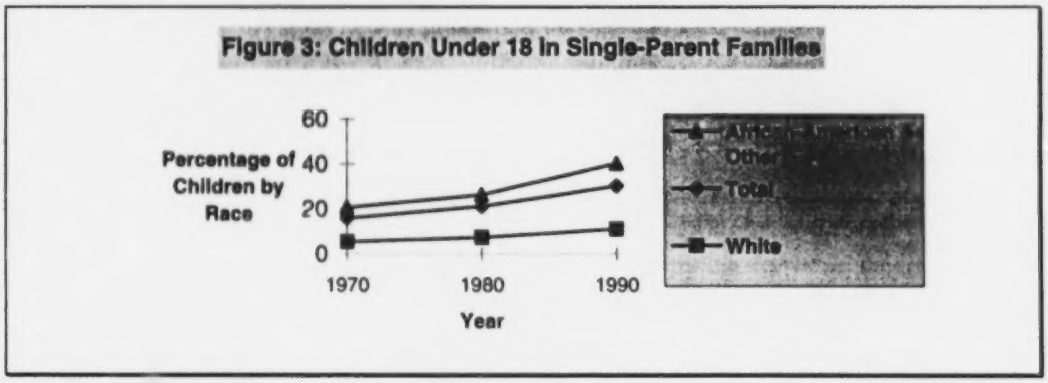
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 51 babies, 49.5% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 43.2% and in 1960 it was 15.7%. In 1994, 14.8% of White children and 61.8% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 5 babies, 4.9% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 56, constituting 54.4% of all babies, 18.5% of White babies, and 67.1% of African-American and Others.



Divorce Rate: In 1994, 145 marriage licenses were issued, while 21 divorce decrees involving 19 children were filed. In 1970 only 2 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 497 children lived with only one parent. This was 30.3% of all children, up from 21.2% in 1980 and 16.0% in 1970. In 1990, 11.2% of White children and 40.3% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 77.1% of mothers with children under 6 and 84.2% with children 6 - 17 were in the labor force. This has increased substantially from 28.9% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 41 children investigated as alleged child abuse and neglect victims: 24.4% for physical abuse, 22.0% for sexual abuse, 70.7% for neglect, and 22.0% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 32 children were victims of abuse and neglect: of these 46.9% were male and 53.1% were female; 25.0% were White, and 75.0% were African-American and Other. By age, 21.9% were 0 - 5, 50.0% were 6 - 12, and 28.1% were 13 - 17. They constituted 1.5% of all children age 18 or younger; 1.2% of all Whites and 1.6% of all African-Americans and Others. In the verified cases, 40.6% of abused and neglected children lived in two parent families, 40.6% in single parent families, 12.5% with extended families, and 6.3% in other circumstances.

Family Violence: In 1994, 49 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 43.0% of all assaults, which include both simple and aggravated assaults. Overall, 53.1% of all domestic assaults involve spouse abuse (constituting 23.0% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 13.1% of all children did not live with their natural parents; of these, 111 or 5.1% of children lived with relatives, 43 or 2.0% lived with non-relatives, and 131 were in institutional facilities.

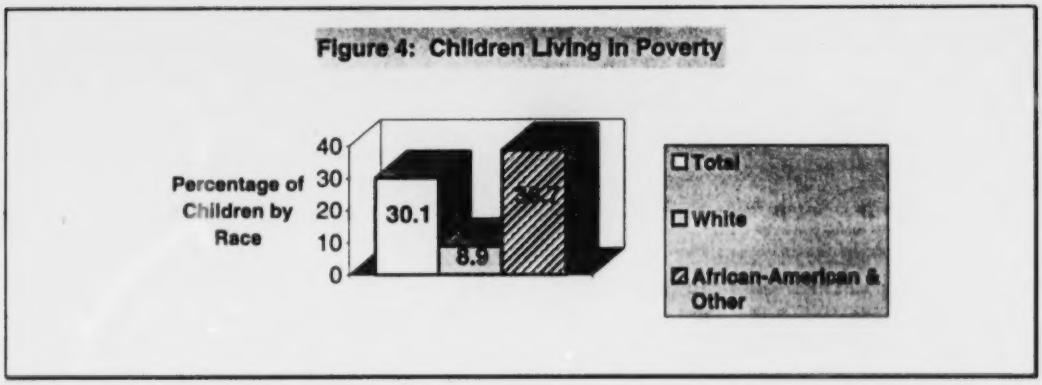
Out of Home Placements: As of September 30, 1996, 8 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 12.5% 0-2, 12.5% 3-5, 37.5% 6-10, 0.0% 11-13, and 37.5% 14 and above. The foster care population is comprised of 37.5% males and 62.5% females. Regarding their future, 12.5% were under a plan for placement in adoptive homes, 50.0% for return to a parent or guardian, 0.0% for placement with a relative, 37.5% for independent living, 0.0% for permanent foster care, and 0.0% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 3.17 adults for every person below age 18. This was up substantially from 1960, when there were only 1.12 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 608 children and youth under the age of 18 lived in families with incomes below poverty. Over 30.1% of all children and youth lived below poverty: 8.9% of Whites and 38.7% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 30.1% in 1989, it was 35.2% in 1979 and 49.6% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 28.4% of children 0 - 5 and 30.7% of children 6 - 17 lived in poverty; 31.6% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 56.6% of children in single-parent families lived in poverty, but only 16.8% of children in married-couple families were poor. Children in single-parent families made up 61.0% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 696 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 88 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	2,021	608	696	884	977	1,034	1,131
Percent		30.1%	34.4%	43.7%	48.3%	51.2%	56.0%
White	584	52	61	102	152	163	200
Percent		8.9%	10.4%	17.5%	26.0%	27.9%	34.2%
African-American and Other	1,437	556	635	782	825	871	931
Percent		38.7%	44.2%	54.4%	57.4%	60.6%	64.8%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 12.9% of households did not have a car; 6.7% of Whites and 18.4% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 18.3% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 38.2% of households had no phone.

Income: The mean income of families with children in 1989 was $28,166; in 1979, it had been $25,505, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 15.1%.

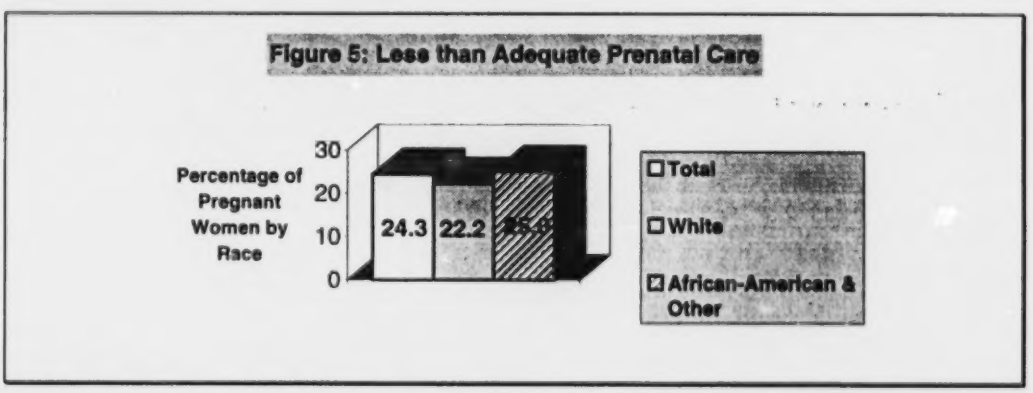
The mean income of single-parent families with children was $11,395 in 1989, as compared with $35,005 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 141 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 46.8% had child support court orders. The average monthly payment of child support was $150.44, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 38 parents in non-AFDC families were obligated to pay a monthly average of $201.27. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 15 or 14.6% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 25 or 24.3% of pregnant women received less than adequate prenatal care: 6 or 22.2% of Whites and 19 or 25.0% of African-Americans and Others. In that same year, 0 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 16 or 15.5% of all babies in the county were born with low birthweight. Over 17.1% of African-American babies and 11.1% of White babies were born with low birthweight. During 1992-94, approximately 6 or 2.0% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 29.8%. For Whites, the rate increased by 37.0%, while for African-Americans and Others, the rate decreased by 41.2%. Over the three-year period 1992-94, 1 White and 3 African-American and Other infants died before age one. By comparison, 1 White and 6 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 0 White and 2 African-American and Other children ages 1-14 died in the county. During 1982-84, 2 White and 2 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 51.0% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 7.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 99 to 149 youth ages 13-19 in the county were infected with a STD. In the county, there were no reported cases of children under age 15 and 3 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 12.5% first smoked by age 11, 21.6% by age 13, and 29.0% by age 15. In a typical month, 8.5% of 7th and 8th graders and 10.2% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 27.5% of White 7th to 12th graders used cigarettes, in comparison with 6.1% African-Americans. A smaller but significant group of high school students (3.1%) used smokeless tobacco monthly; it was used primarily by White males (34.7%) compared with 0.6% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 218 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 55 students in grades 1-12 with learning disabilities and 48 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 158 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 323 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 2 nurses; 1 are currently available.

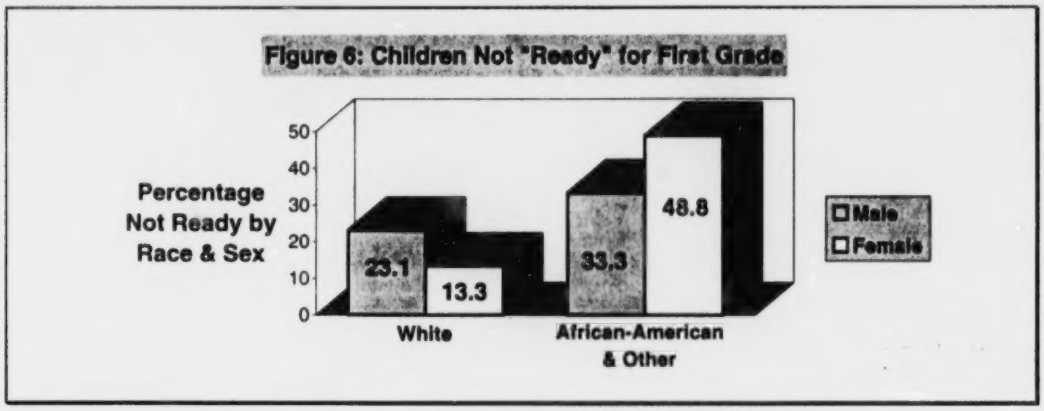
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 20.0% for Whites and 40.5% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

39 children not ready **35.1% children not ready**

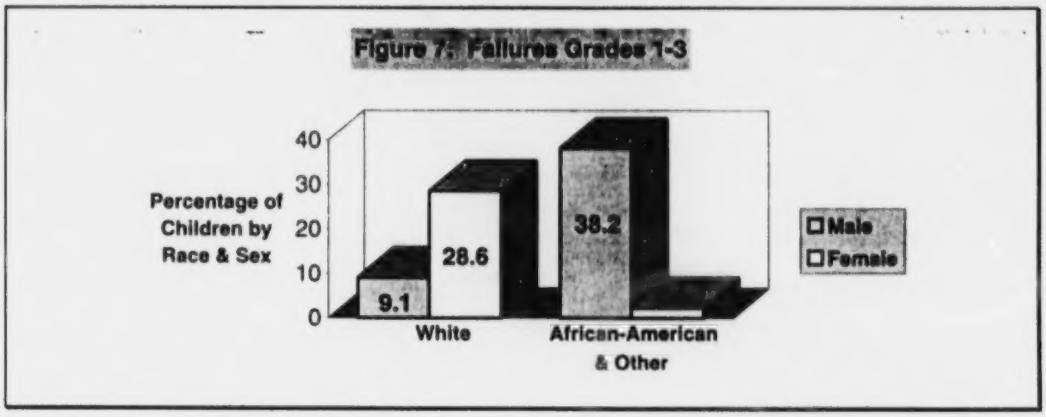


1st Grade Failures in 1995:

10 children failing **11.0% children failing**

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

18 children failing **18.0% children failing**



Overage for Grade 3 in 1996:

19 children overage	17.9% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 33 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 17.2% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 35.1% assessed not ready for the 1st grade, 17.9% overage in grade 3, and 17.2% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

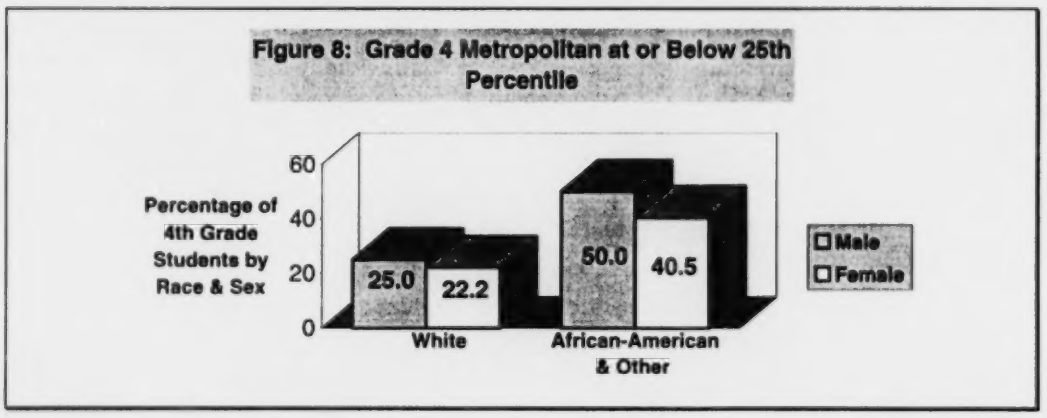
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 48 speech and language impaired, 55 learning disabled, 5 emotionally disabled, 51 mentally impaired, and 6 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 13.6% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

41 children at or below 25th percentile	40.6% children at or below 25th percentile



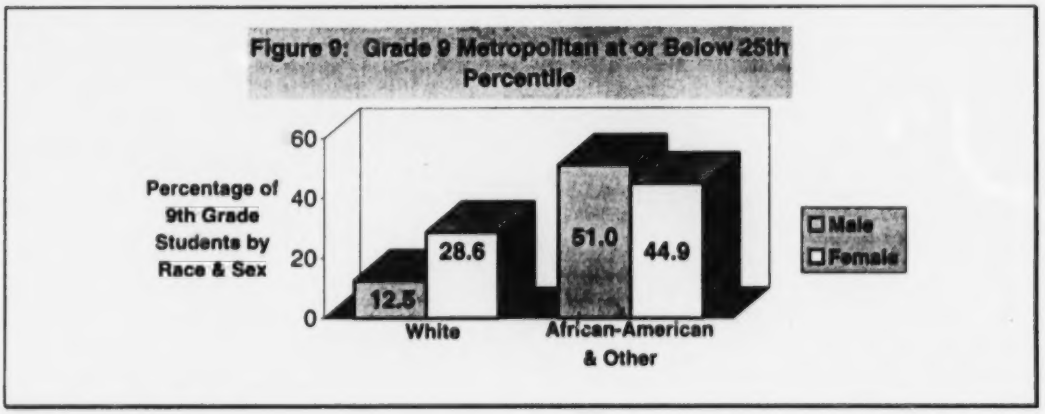
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	53	54.1	57	57.6
White Males	1	14.3	5	71.4
White Females	3	37.5	3	37.5
African-American & Other Males	24	60.0	29	70.7
African-American & Other Females	25	58.1	20	46.5

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

51 students at or below 25th percentile

44.3% students at or below 25th percentile

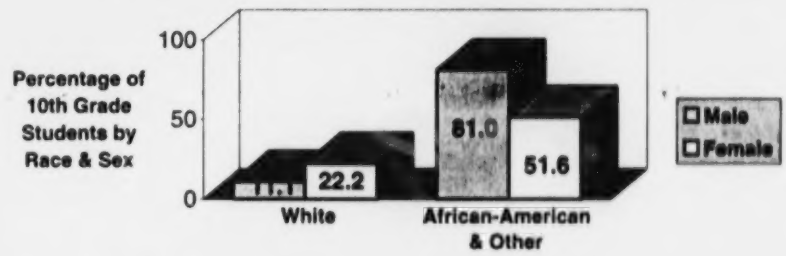


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

53 students not passing all parts

58.2% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam

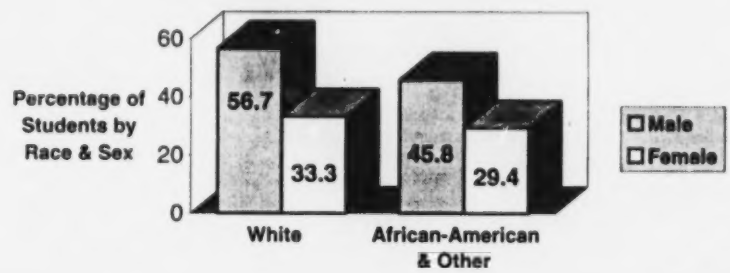


Achievement Trends: **How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 53.6% to 27.8% in math and from 70.9% to 32.2% in reading. During the 1990s the trend altered, with 54.1% not meeting 8th grade math standards in 1996 and 57.6% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 52.8% in 1983 on the CTBS, 47.4% in 1990 on the Stanford, and 40.4% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 56.8% in 1990 and 55.5% in 1995.**

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

170 students drop out **39.2% students drop out**

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 39.3% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 27.8% during 1985-89, and 48.8% during 1990-94. During the 1995-96 period, 88.2% of all who did graduate received the State High School Diploma, while 8.8% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 2.9% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 17 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 9 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 37.0% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 39.2% to 58.2%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 70 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 12.9% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

21.9%	White Males	4.2%	African-American & Other Males
5.7%	White Females	19.4%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 12 girls between the ages of 14 and 17 became pregnant in 1993 and 19 in 1994. In 1994, this represented 7.6% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 4.3% for Whites and 8.9% for African-Americans and others. Of all pregnancies to 14-17 year olds, 63.2% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it increased by 59.0%.

Alcohol Use: In 1992-93, 33.6% of 7th and 8th graders and 35.4% of high schoolers said they had used alcohol in the past month. Of White males, 36.6% had used it in the past month, compared with 47.8% of African-American males; likewise, 20.5% of White females said they had used alcohol, compared with 25.0% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 17.5% had used alcohol by age 11 or younger, 36.0% by age 13, and 58.9% by age 15.

During the previous year, 47.7% of 7th and 8th graders and 48.8% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 26.7% said they had driven after drinking, and 10.2% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 69.5% of eighth graders and 86.8% of seniors felt that beer was easy to get; 56.7% of eighth graders and 43.5% of seniors felt there was not a great risk in using it regularly.

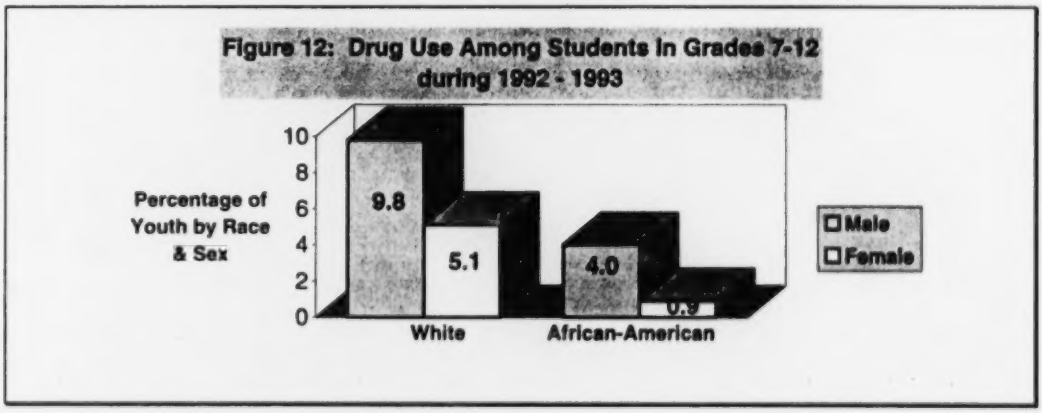
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 24.0% of all high school students in 1992-93 responded 3 or more drinks at a time; 12.0% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 4.2% of 7th and 8th graders and 2.5% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (9.8%) and White females (5.1%); use among African-American males was 4.0%; African-American females, 0.9%. Some young people first used drugs at an early age: among students 15 and older, 2.8% experienced their first use by age 11 or sooner; 5.3% had used a drug by age 13, and 8.6% by age 15.

Of seniors who had initiated use of marijuana, 0.0% had started use at home, 14.6% at a friend's home, and 85.4% elsewhere. During the past year, 1.4% of all high school students said that they used marijuana at home, 2.3% at a friend's house, and 3.2% in a car. In the past year, 3.9% of all high school students who drive and 2.9% of seniors who drive said that they had driven after using drugs . Furthermore, 2.8% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 20.7% of 8th graders who had an opinion said it is easy to get marijuana and 14.2% said it is easy to get cocaine or crack; 56.4% of seniors who had an opinion said it is easy to get marijuana and 50.0% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 4.1% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 45 individual juvenile offenders in the county were referred to the Solicitor; of these, 2.2% were age 12 or younger, 24.4% were 13 or 14, and 73.3% were 15 or older.

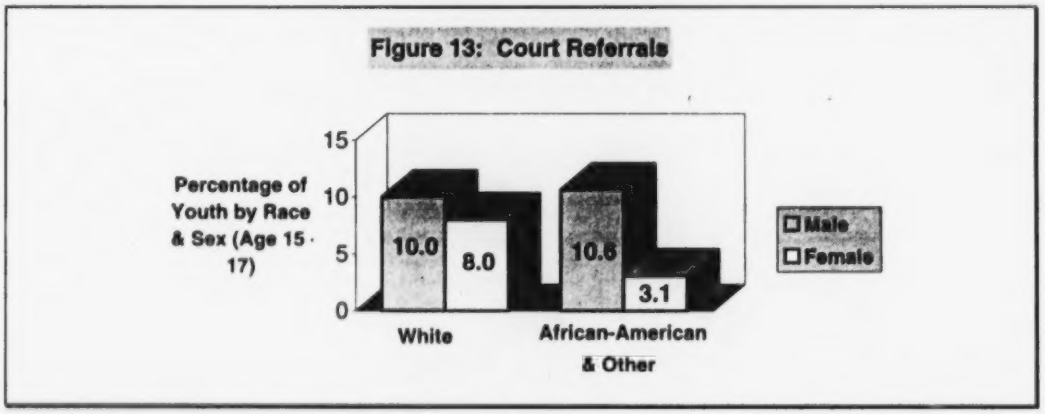
Of the referrals to the family court, 35.8% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 0 juvenile cases constituting 0.0% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 37.1% lived in families with income under $10,000, 28.6% with $10,000-$19,999 and 34.3% with $20,000 or more. Furthermore, only 20.0% of delinquents lived with both natural parents, while 57.1% lived in a single parent household and 22.9% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 54.3% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 20.0% had at least one prior referral and 11.1% had been referred to court 3 times or more.

In 1994-95, there were 1 juvenile commitments from the county to State institutions.

During 1994-95, 33 youth ages 15 to 17 were referred to the family courts. In the county, 7.7% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 6 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 2 deaths between 1990 and 1994; homicides killed 0 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 30.3% of children in single-parent families, 30.1% in poverty, 39.2% dropping out of school, 35.4% of high school students using alcohol and 4.1% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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-or-
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SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

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Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

MCCORMICK

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	12	11.7	7.3	1.60	41	1994
Births to Mothers Not Completing High School	25	24.3	21.8	1.11	21	1994
Births to Single Mothers	51	49.5	30.4	1.63	42	1994
Children in Single-Parent Families	497	30.3	25.1	1.21	34	1990
Parents Working	689	82.6	74.3	1.11	46	1990
Abuse & Neglect Victims	32	1.5	1.0	1.50	37	1995-96
Separation from Parents	285	13.1	5.1	2.57	46	1990
Economic Status						
Poor Children	608	30.1	21.0	1.43	34	1989
Mean Income of Families with Children	$28,166	NA	NA	0.79	38	1989
Health						
Less than Adequate Prenatal Care	25	24.3	32.0	0.76	4	1994
Low Birth Weight	16	15.5	9.2	1.68	46	1994
Not Adequately Immunized	11	7.0	18.0	0.39	5	1995
Cigarette Smokers (High School)	35	10.2	23.1	0.44	2	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	39	35.1	28.1	1.25	41	1994-95
1st Grade Failures	10	11.0	6.8	1.62	34	1994-95
Failures grades 1-3 (approx. %)	18	18.0	11.3	1.59	34	1994-95
Overage for Grade 3	19	17.9	16.2	1.10	27	1995-96
Special Education (ages 8 and 9)	33	17.2	15.3	1.12	33	1995-96
School Achievement						
Special Education Grades 1 - 12	165	13.6	13.0	1.05	25	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	41	40.6	27.9	1.46	39	1995-96
Grade 8 BSAP - Math (Below standards)	53	54.1	34.8	1.55	45	1995-96
Grade 8 BSAP - Reading (Below standards)	57	57.6	28.8	2.00	46	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	51	44.3	29.5	1.50	39	1995-96
Exit Exam (Not passing all parts on 1st attempt)	53	58.2	35.3	1.65	45	1995-96
Dropout Rate	170	39.2	27.3	1.44	43	1992-95
25-34 Year olds with no HS Degree or GED	587	37.0	19.1	1.94	46	1990
Adolescent Risk Behavior						
Not in School or Employed	70	12.9	9.6	1.34	38	1990
Pregnancy (Ages 14 - 17)	19	7.6	4.8	1.58	44	1994
Alcohol Use (High School)	121	35.4	37.4	0.95	20	1992-93
Drug Use (High School)	9	2.5	12.8	0.20	1	1992-93
Binge Drinking (5 or more drinks)	41	12.0	16.3	0.74	10	1992-93
Delinquency (ages 15 - 17)	33	7.7	6.4	1.20	34	1994-95

* 1 = "best" 46 = "worst"

MCCORMICK TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	7	7.3	1.11	1992	5	4.9	0.74	1993	12	11.7	1.60	1994
Births to Mothers Not Completing High School	26	27.1	1.15	1992	21	20.4	0.91	1993	25	24.3	1.11	1994
Births to Single Mothers	60	62.5	2.06	1992	50	48.5	1.60	1993	51	49.5	1.63	1994
Children in Single-Parent Families		16.0	1.10	1970		21.2	1.12	1980	497	30.3	1.21	1990
Economic Status												
Poor Children		49.6	1.73	1969		35.2	1.66	1979	608	30.1	1.43	1989
Mean Income of Families with Children					25,505	N/A	1.30	1979	28,166	N/A	1.26	1989
Health												
Less than Adequate Prenatal Care	37	38.5	0.97	1992	23	22.3	0.63	1993	25	24.3	0.76	1994
Low Birth Weight	9	9.4	1.04	1992	8	7.8	0.84	1993	16	15.5	1.68	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	29	28.7	1.08	1990-91	35	32.7	1.18	1992-93	39	35.1	1.25	1994-95
1st Grade Failures	1	0.9	0.10	1991-92	5	5.2	0.54	1992-93	10	11.0	1.62	1994-95
Failures Grades 1-3 (approx. %)	1	0.9	0.06	1991-92	9	9.4	0.66	1992-93	18	18.0	1.59	1994-95
Overage for Grade 3	7	7.4	0.29	1991-92	15	14.9	0.73	1993-94	19	17.9	1.10	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	45	37.5	1.94	1991-92	20	22.5	1.14	1993-94	41	40.6	1.46	1995-96*
Grade 8 BSAP - Math (Below Standards)	65	54.2	2.01	1991-92	82	70.1	2.27	1993-94	53	54.1	1.55	1995-96
Grade 8 BSAP - Reading (Below Standards)	48	40.0	1.64	1991-92	57	48.7	1.69	1993-94	57	57.6	2.00	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	49	41.5	1.89	1991-92	41	32.8	1.35	1993-94	51	44.3	1.50	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	31	45.6	1.47	1991-92	46	52.9	1.62	1993-94	53	58.2	1.65	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	10	4.0	0.85	1992	12	4.8	1.07	1993	19	7.6	1.58	1994
Alcohol Use (High School)	145	39.3	0.98	1989-90					121	35.4	0.95	1992-93
Drug Use (High School)	19	5.1	0.38	1989-90					9	2.5	0.20	1992-93
Binge Drinking (5 or more drinks)		9.5	0.61	1989-90					41	12.0	0.74	1992-93

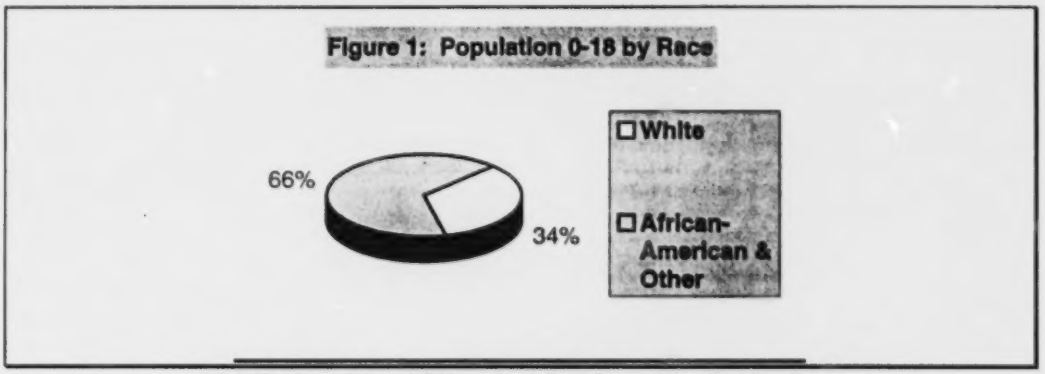
SOUTH CAROLINA kids count

1996 Report MARION

DEMOGRAPHICS

In 1994, there were 10,790 children under age 18 in the county. Of these, 3,660 were White and 7,120 were African-American and Other races. There were 11,620 children under age 18 in 1980, 11,941 in 1970, and 14,897 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 30.7% of the population in 1994, down from 46.5% in 1960, 39.4% in 1970 and 34.0% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 37.8% of all households in 1990, as compared with 47.0% of households in 1960, had children below the age of 18.

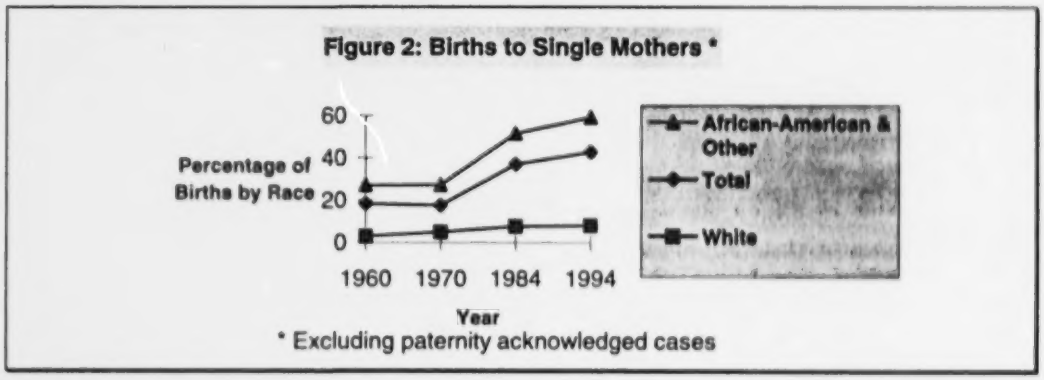
Births to Teen Mothers: In 1994, 55 babies were born to mothers younger than age 18. These babies were 10.2% of all children born in the county; 3.5% of all White babies and 13.4% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 78.2% were born to single mothers.

In 1994, 132 babies were born to mothers younger than age 20. These babies were 24.5% of all children born in the county; 16.2% of all White babies and 28.5% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 72.0% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 154 babies, 28.6% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 53.8% in 1970.

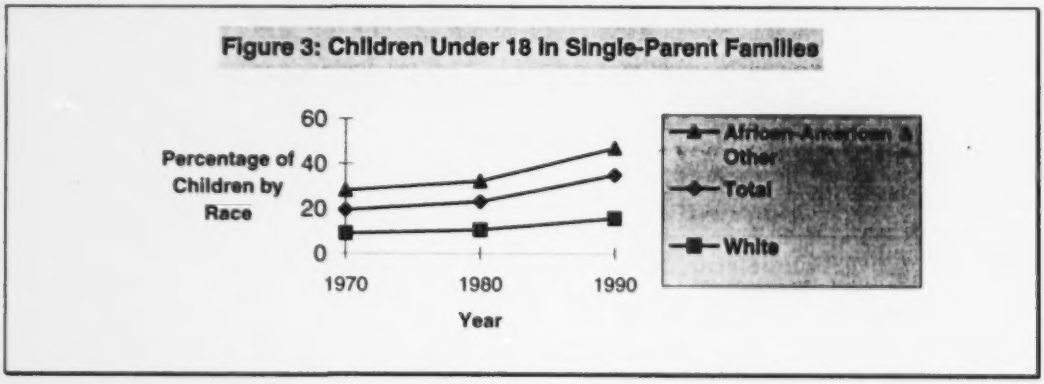
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 230 babies, 42.8% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 37.1% and in 1960 it was 18.4%. In 1994, 8.1% of White children and 59.2% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 53 babies, 9.9% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 283, constituting 52.6% of all babies, 19.1% of White babies, and 68.5% of African-American and Others.



Divorce Rate: In 1994, 322 marriage licenses were issued, while 123 divorce decrees involving 104 children were filed. In 1970 only 50 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 2,982 children lived with only one parent. This was 34.8% of all children, up from 22.9% in 1980 and 19.4% in 1970. In 1990, 15.6% of White children and 46.8% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 71.5% of mothers with children under 6 and 79.9% with children 6 - 17 were in the labor force. This has increased substantially from 43.0% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 717 children investigated as alleged child abuse and neglect victims: 26.6% for physical abuse, 5.6% for sexual abuse, 76.4% for neglect, and 31.1% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 126 children were victims of abuse and neglect: of these 52.0% were male and 48.0% were female; 17.1% were White, and 82.9% were African-American and Other. By age, 50.0% were 0 - 5, 31.7% were 6 - 12, and 18.3% were 13 - 17. They constituted 1.2% of all children age 18 or younger; 0.6% of all Whites and 1.5% of all African-Americans and Others. In the verified cases, 3.2% of abused and neglected children lived in two parent families, 5.6% in single parent families, 5.6% with extended families, and 85.7% in other circumstances.

Family Violence: In 1994, 140 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 16.0% of all assaults, which include both simple and aggravated assaults. Overall, 46.4% of all domestic assaults involve spouse abuse (constituting 7.4% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 6.2% of all children did not live with their natural parents; of these, 541 or 5.1% of children lived with relatives, 117 or 1.1% lived with non-relatives, and 0 were in institutional facilities.

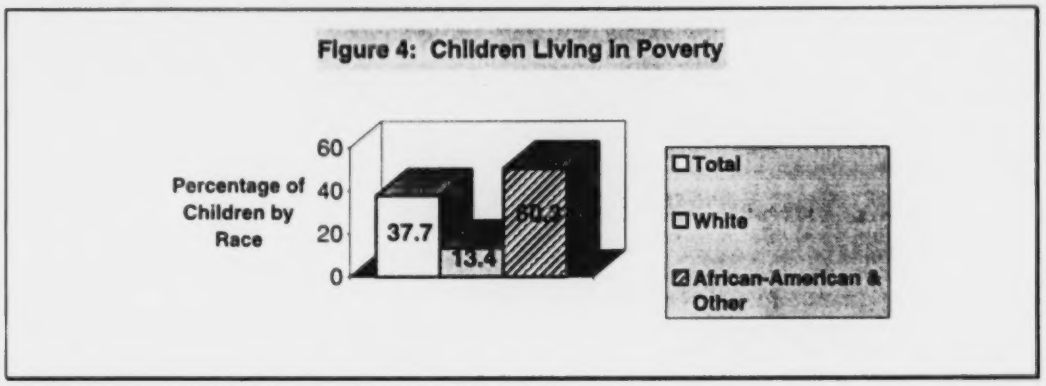
Out of Home Placements: As of September 30, 1996, 63 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 12.7% 0-2, 11.1% 3-5, 12.7% 6-10, 12.7% 11-13, and 50.8% 14 and above. The foster care population is comprised of 60.3% males and 39.7% females. Regarding their future, 20.6% were under a plan for placement in adoptive homes, 25.4% for return to a parent or guardian, 3.2% for placement with a relative, 30.2% for independent living, 19.0% for permanent foster care, and 1.6% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.26 adults for every person below age 18. This was up substantially from 1960, when there were only 1.15 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 4,002 children and youth under the age of 18 lived in families with incomes below poverty. Over 37.7% of all children and youth lived below poverty: 13.4% of Whites and 50.3% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 37.7% in 1989, it was 33.3% in 1979 and 43.8% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 41.6% of children 0 - 5 and 36.1% of children 6 - 17 lived in poverty; 35.2% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 62.1% of children in single-parent families lived in poverty, but only 21.1% of children in married-couple families were poor. Children in single-parent families made up 65.0% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 4,955 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 953 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	10,628	4,002	4,955	5,873	6,737	6,926	7,163
Percent		37.7%	46.6%	55.3%	63.4%	65.2%	67.4%
White	3,646	488	753	894	1,236	1,295	1,346
Percent		13.4%	20.7%	24.5%	33.9%	35.5%	36.9%
African-American and Other	6,982	3,514	4,202	4,979	5,501	5,631	5,817
Percent		50.3%	60.2%	71.3%	78.8%	80.7%	83.3%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 18.5% of households did not have a car; 7.3% of Whites and 29.8% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 15.7% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 33.5% of households had no phone.

Income: The mean income of families with children in 1989 was $26,362; in 1979, it had been $27,188, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 6.9%.

The mean income of single-parent families with children was $10,467 in 1989, as compared with $33,628 in married-couple families with children.

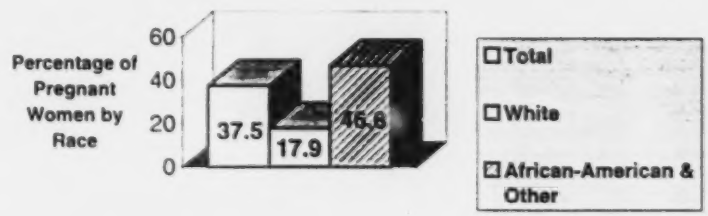
Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 779 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 43.0% had child support court orders. The average monthly payment of child support was $128.02, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 212 parents in non-AFDC families were obligated to pay a monthly average of $161.11. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 179 or 33.3% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 202 or 37.5% of pregnant women received less than adequate prenatal care: 31 or 17.9% of Whites and 171 or 46.8% of African-Americans and Others. In that same year, 16 women received no prenatal care at all.

Figure 5: Less than Adequate Prenatal Care



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 62 or 11.5% of all babies in the county were born with low birthweight. Over 14.8% of African-American babies and 4.6% of White babies were born with low birthweight. During 1992-94, approximately 35 or 2.2% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 68.3%. For Whites, the rate decreased by 80.9%, while for African-Americans and Others, the rate decreased by 66.6%. Over the three-year period 1992-94, 1 White and 10 African-American and Other infants died before age one. By comparison, 6 White and 32 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 2 White and 6 African-American and Other children ages 1-14 died in the county. During 1982-84, 4 White and 6 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 68.8% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 13.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 423 to 635 youth ages 13-19 in the county were infected with a STD. In the county, there were no reported cases of children under age 15 and 52 youth ages 15 - 19 infected with gonorrhea; 2 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 11.2% first smoked by age 11, 26.0% by age 13, and 38.8% by age 15. In a typical month, 12.4% of 7th and 8th graders and 19.0% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 28.0% of White 7th to 12th graders used cigarettes, in comparison with 10.8% African-Americans. A smaller but significant group of high school students (3.4%) used smokeless tobacco monthly; it was used primarily by White males (13.5%) compared with 1.5% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 1,079 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 346 students in grades 1-12 with learning disabilities and 298 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 747 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 1,597 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 10 nurses; 1 are currently available.

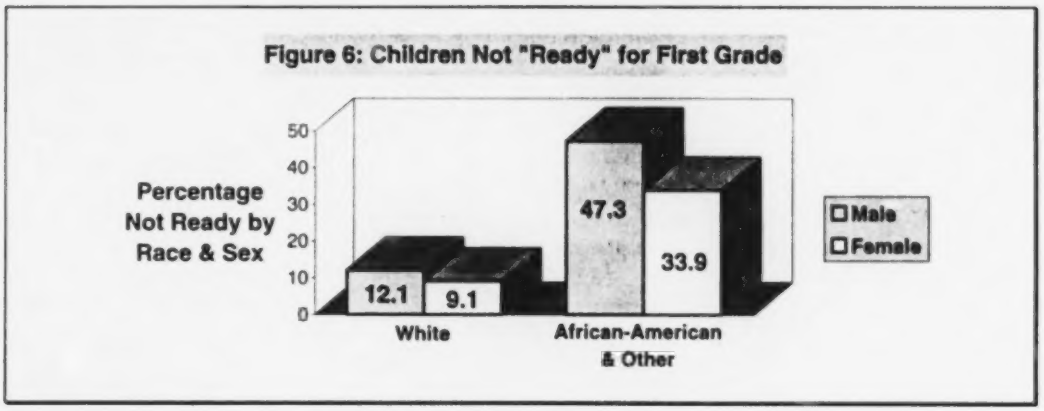
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 43.0% for Whites and 47.3% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

99 children not ready	33.7% children not ready

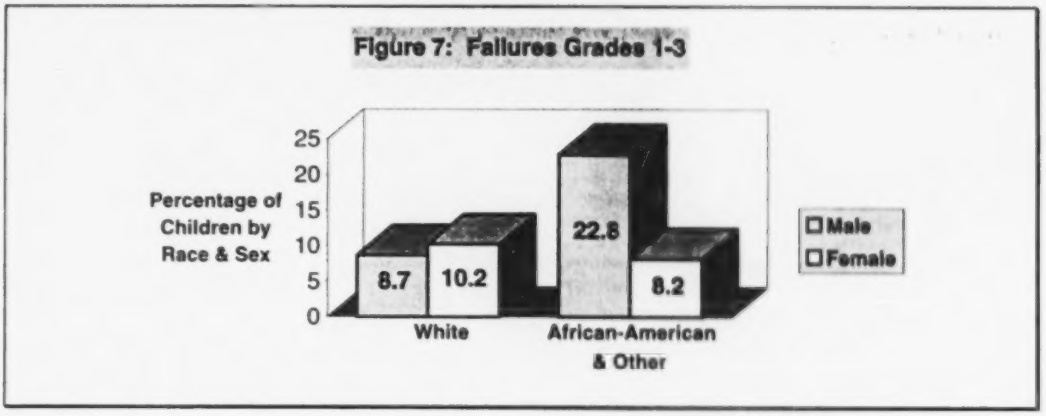


1st Grade Failures in 1995:

34 children failing	6.2% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

78 children failing	14.2% children failing



Overage for Grade 3 in 1996:

58 children overage	12.1% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 202 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 19.9% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 33.7% assessed not ready for the 1st grade, 12.1% overage in grade 3, and 19.9% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

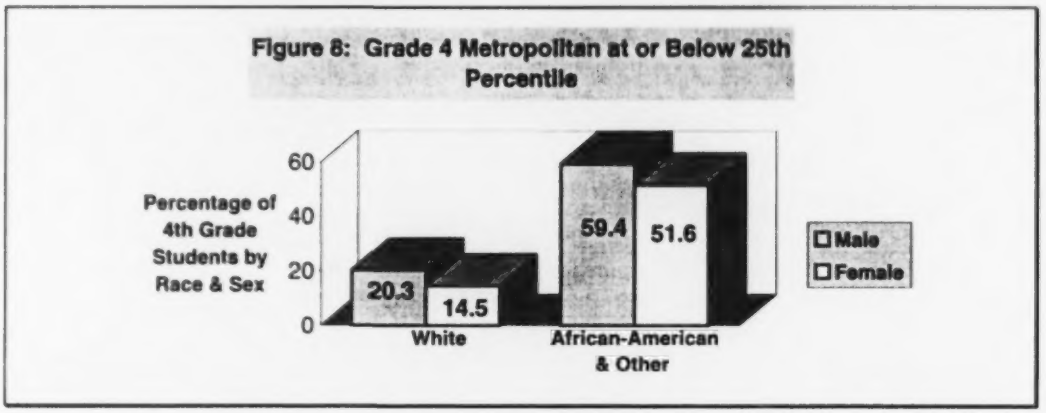
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 298 speech and language impaired, 346 learning disabled, 36 emotionally disabled, 323 mentally impaired, and 11 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 15.7% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

234 children at or below 25th percentile	46.3% children at or below 25th percentile



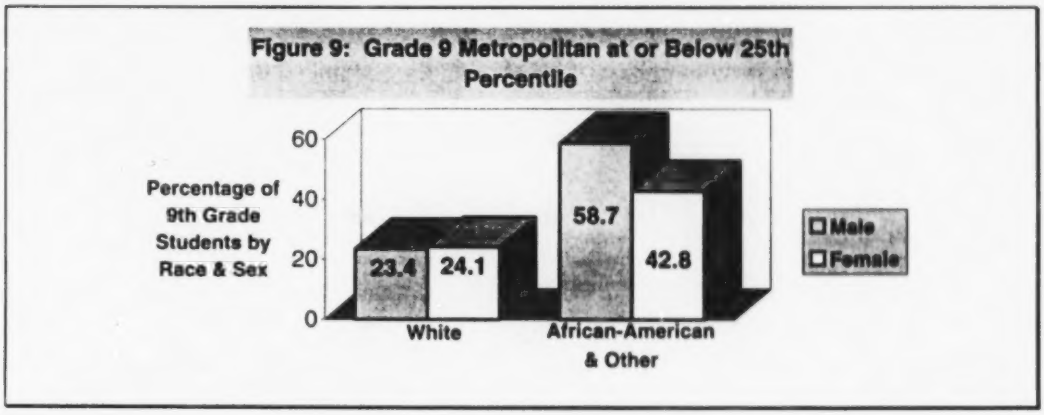
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	266	47.7	227	40.8
White Males	23	32.9	18	25.7
White Females	18	20.5	9	10.2
African-American & Other Males	111	59.7	117	63.2
African-American & Other Females	114	53.5	83	39.0

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

280 students at or below 25th percentile

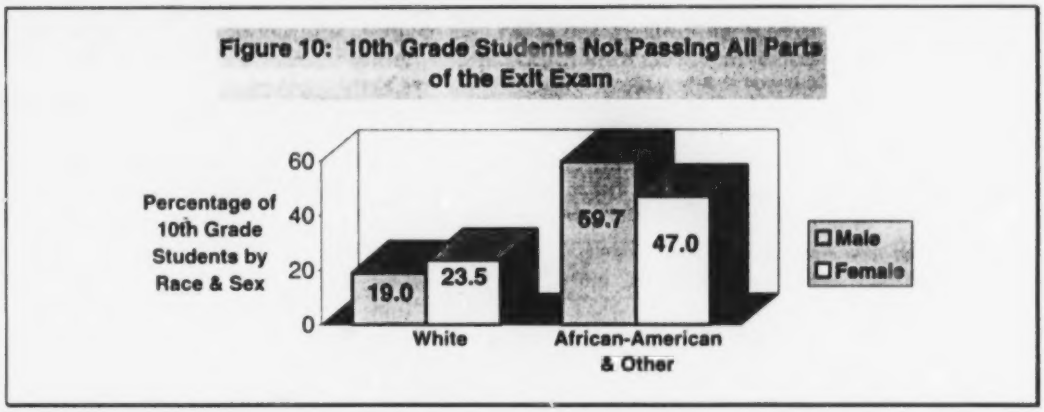
44.3% students at or below 25th percentile



Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

203 students not passing all parts

43.8% students not passing all parts

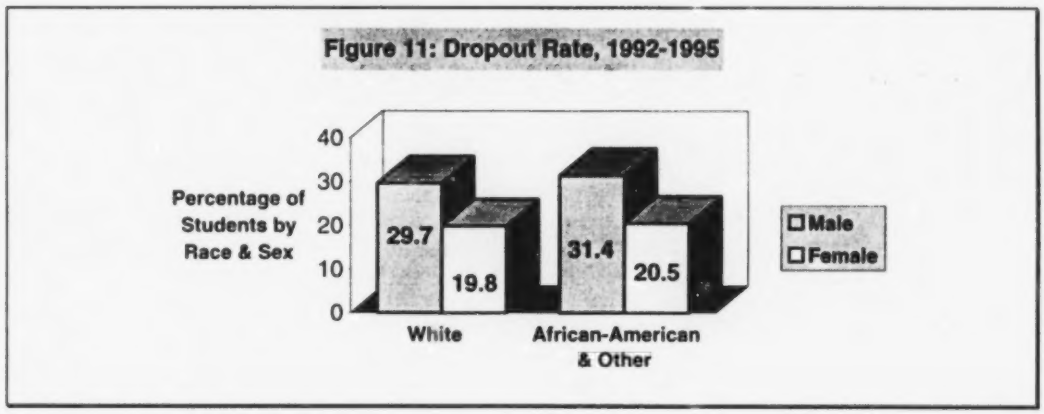


Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 59.5% to 38.5% in math and from 63.7% to 37.2% in reading. During the 1990s the trend altered, with 47.7% not meeting 8th grade math standards in 1996 and 40.8% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 37.9% in 1983 on the CTBS, 41.2% in 1990 on the Stanford, and 38.2% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 40.1% in 1990 and 40.5% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

637 students drop out

25.5% students drop out



Dropouts: A distressing number of students drop out and fail to graduate. An average 29.6% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 29.0% during 1985-89, and 28.7% during 1990-94. During the 1995-96 period, 91.4% of all who did graduate received the State High School Diploma, while 1.8% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 6.8% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 72 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 9 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 30.1% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 25.5% to 47.7%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 232 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 10.3% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

11.3%	White Males	11.9%	African-American & Other Males
6.1%	White Females	10.2%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 52 girls between the ages of 14 and 17 became pregnant in 1993 and 62 in 1994. In 1994, this represented 5.1% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 2.6% for Whites and 6.5% for African-Americans and others. Of all pregnancies to 14-17 year olds, 85.5% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 3.2%.

Alcohol Use: In 1992-93, 14.8% of 7th and 8th graders and 32.2% of high schoolers said they had used alcohol in the past month. Of White males, 41.0% had used it in the past month, compared with 26.3% of African-American males; likewise, 30.5% of White females said they had used alcohol, compared with 15.7% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 15.0% had used alcohol by age 11 or younger, 31.8% by age 13, and 53.8% by age 15.

During the previous year, 33.7% of 7th and 8th graders and 46.5% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 24.8% said they had driven after drinking, and 10.5% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 48.5% of eighth graders and 81.7% of seniors felt that beer was easy to get; 47.2% of eighth graders and 50.0% of seniors felt there was not a great risk in using it regularly.

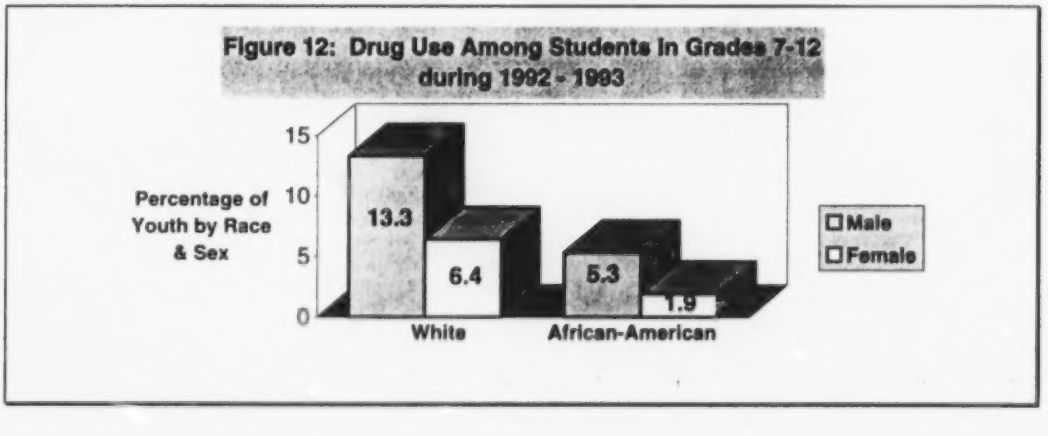
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 23.7% of all high school students in 1992-93 responded 3 or more drinks at a time; 13.3% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 2.9% of 7th and 8th graders and 7.1% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (13.3%) and White females (6.4%); use among African-American males was 5.3%; African-American females, 1.9%. Some young people first used drugs at an early age: among students 15 and older, 2.1% experienced their first use by age 11 or sooner; 5.0% had used a drug by age 13, and 10.7% by age 15.

Of seniors who had initiated use of marijuana, 14.7% had started use at home, 30.9% at a friend's home, and 54.4% elsewhere. During the past year, 1.6% of all high school students said that they used marijuana at home, 4.7% at a friend's house, and 3.0% in a car. In the past year, 3.7% of all high school students who drive and 5.5% of seniors who drive said that they had driven after using drugs . Furthermore, 3.9% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 24.6% of 8th graders who had an opinion said it is easy to get marijuana and 22.2% said it is easy to get cocaine or crack; 66.2% of seniors who had an opinion said it is easy to get marijuana and 65.1% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 11.5% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 255 individual juvenile offenders in the county were referred to the Solicitor; of these, 22.7% were age 12 or younger, 36.5% were 13 or 14, and 40.8% were 15 or older.

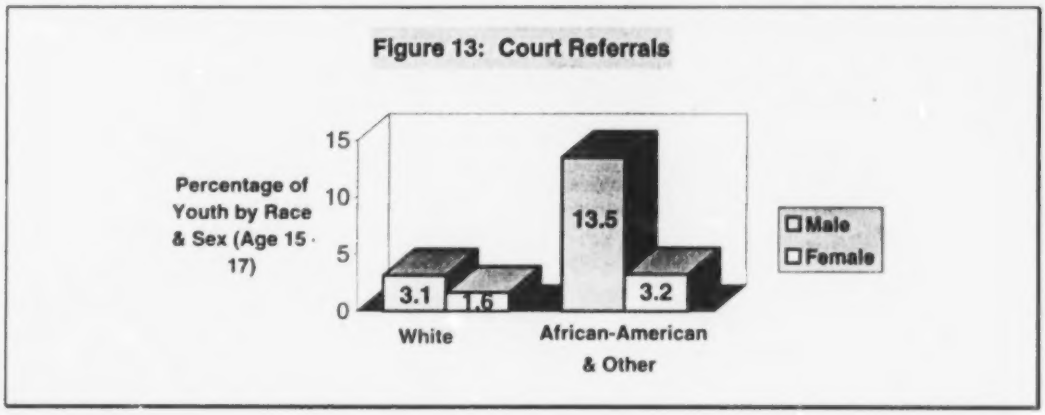
Of the referrals to the family court, 15.0% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 51 juvenile cases constituting 16.2% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 45.2% lived in families with income under $10,000, 44.7% with $10,000-$19,999 and 10.1% with $20,000 or more. Furthermore, only 13.2% of delinquents lived with both natural parents, while 58.1% lived in a single parent household and 28.6% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 38.5% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 48.6% had at least one prior referral and 19.6% had been referred to court 3 times or more.

In 1994-95, there were 24 juvenile commitments from the county to State institutions.

During 1994-95, 103 youth ages 15 to 17 were referred to the family courts. In the county, 6.0% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 17 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 5 deaths between 1990 and 1994; homicides killed 0 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 34.8% of children in single-parent families, 37.7% in poverty, 25.5% dropping out of school, 32.2% of high school students using alcohol and 11.5% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

Dr. A. Baron Holmes (803-734-2291) E-mail bholmes@ogc.state.sc.us
-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

MARION

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	55	10.2	7.3	1.40	33	1994
Births to Mothers Not Completing High School	154	28.6	21.8	1.31	37	1994
Births to Single Mothers	230	42.8	30.4	1.41	32	1994
Children in Single-Parent Families	2,982	34.8	25.1	1.39	41	1990
Parents Working	3,158	77.6	74.3	1.04	35	1990
Abuse & Neglect Victims	126	1.2	1.0	1.20	31	1995-96
Separation from Parents	658	6.2	5.1	1.22	33	1990
Economic Status						
Poor Children	4,002	37.7	21.0	1.80	42	1989
Mean Income of Families with Children	$26,362	NA	NA	0.74	43	1989
Health						
Less than Adequate Prenatal Care	202	37.5	32.0	1.17	33	1994
Low Birth Weight	62	11.5	9.2	1.25	37	1994
Not Adequately Immunized	119	13.0	18.0	0.72	22	1995
Cigarette Smokers (High School)	388	19.0	23.1	0.82	17	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	99	33.7	28.1	1.20	39	1994-95
1st Grade Failures	34	6.2	6.8	0.91	19	1994-95
Failures grades 1-3 (approx. %)	78	14.2	11.3	1.26	29	1994-95
Overage for Grade 3	58	12.1	16.2	0.75	9	1995-96
Special Education (ages 8 and 9)	202	19.9	15.3	1.30	42	1995-96
School Achievement						
Special Education Grades 1 - 12	1,014	15.7	13.0	1.21	38	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	234	46.3	27.9	1.66	42	1995-96
Grade 8 BSAP - Math (Below standards)	266	47.7	34.8	1.37	39	1995-96
Grade 8 BSAP - Reading (Below standards)	227	40.8	28.8	1.42	38	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	280	44.3	29.5	1.50	39	1995-96
Exit Exam (Not passing all parts on 1st attempt)	203	43.8	35.3	1.24	29	1995-96
Dropout Rate	637	25.5	27.3	0.93	19	1992-95
25-34 Year olds with no HS Degree or GED	1,478	30.1	19.1	1.58	41	1990
Adolescent Risk Behavior						
Not in School or Employed	232	10.3	9.6	1.07	22	1990
Pregnancy (Ages 14 - 17)	62	5.1	4.8	1.06	22	1994
Alcohol Use (High School)	658	32.2	37.4	0.86	8	1992-93
Drug Use (High School)	145	7.1	12.8	0.55	13	1992-93
Binge Drinking (5 or more drinks)	272	13.3	16.3	0.82	15	1992-93
Delinquency (ages 15 - 17)	103	6.0	6.4	0.94	22	1994-95

* 1 = "best" 46 = "worst"

MARION TRENDS

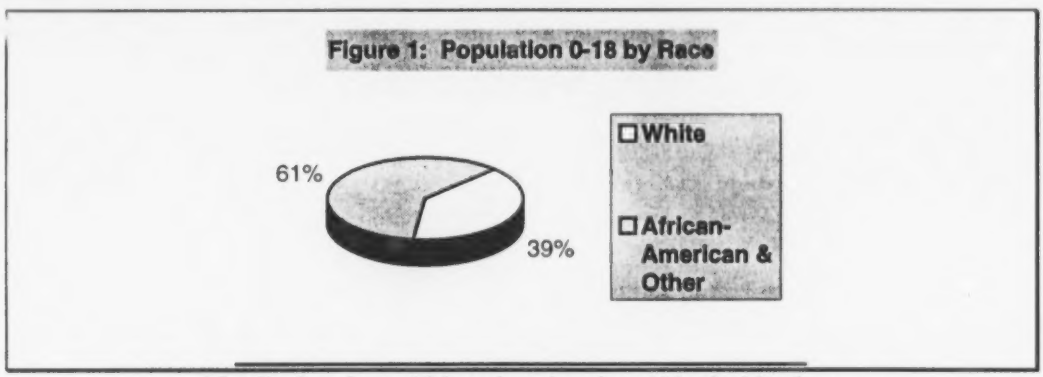
Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	66	12.3	1.86	1992	49	9.7	1.47	1993	55	10.2	1.40	1994
Births to Mothers Not Completing High School	151	28.1	1.19	1992	144	28.6	1.28	1993	154	28.6	1.31	1994
Births to Single Mothers	267	49.7	1.64	1992	242	48.1	1.59	1993	230	42.8	1.41	1994
Children in Single-Parent Families		19.4	1.34	1970		22.9	1.21	1980	2,982	34.8	1.39	1990
Economic Status												
Poor Children		43.8	1.53	1969		33.3	1.57	1979	4,002	37.7	1.80	1989
Mean Income of Families with Children					27,188	N/A	1.22	1979	26,362	N/A	1.35	1989
Health												
Less than Adequate Prenatal Care	289	53.8	1.36	1992	194	38.6	1.09	1993	202	37.5	1.17	1994
Low Birth Weight	62	11.5	1.28	1992	36	7.2	0.77	1993	62	11.5	1.25	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	160	27.9	1.05	1990-91	158	29.5	1.06	1992-93	99	33.7	1.20	1994-95
1st Grade Failures	42	7.4	0.82	1991-92	62	12.1	1.25	1992-93	34	6.2	0.91	1994-95
Failures Grades 1-3 (approx. %)	57	9.9	0.70	1991-92	82	15.7	1.10	1992-93	78	14.2	1.26	1994-95
Overage for Grade 3	180	30.7	1.19	1991-92	102	20.3	0.99	1993-94	58	12.1	0.75	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	152	27.0	1.40	1991-92	162	28.9	1.46	1993-94	234	46.3	1.66	1995-96*
Grade 8 BSAP - Math (Below Standards)	196	30.7	1.14	1991-92	217	36.2	1.17	1993-94	266	47.7	1.37	1995-96
Grade 8 BSAP - Reading (Below Standards)	221	34.5	1.41	1991-92	231	38.5	1.34	1993-94	227	40.8	1.42	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	193	30.0	1.37	1991-92	203	31.7	1.30	1993-94	280	44.3	1.50	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	182	36.2	1.16	1991-92	221	41.5	1.27	1993-94	203	43.8	1.24	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	75	6.3	1.34	1992	52	4.4	0.98	1993	62	5.1	1.06	1994
Alcohol Use (High School)	629	32.6	0.81	1989-90					658	32.2	0.86	1992-93
Drug Use (High School)	163	8.4	0.63	1989-90					145	7.1	0.55	1992-93
Binge Drinking (5 or more drinks)		10.3	0.66	1989-90					272	13.3	0.82	1992-93

1996 Report MARLBORO

DEMOGRAPHICS

In 1994, there were 8,570 children under age 18 in the county. Of these, 3,380 were White and 5,190 were African-American and Other races. There were 10,983 children under age 18 in 1980, 11,037 in 1970, and 13,113 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 28.6% of the population in 1994, down from 46.0% in 1960, 40.7% in 1970 and 34.7% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 36.2% of all households in 1990, as compared with 47.0% of households in 1960, had children below the age of 18.

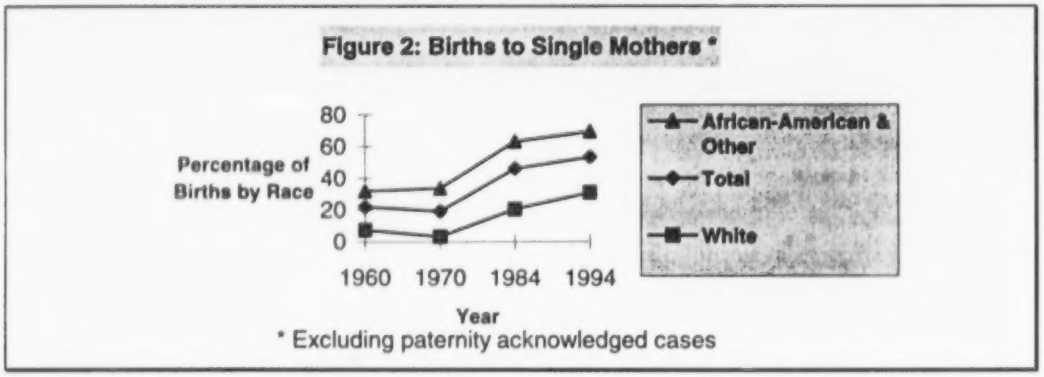
Births to Teen Mothers: In 1994, 57 babies were born to mothers younger than age 18. These babies were 13.2% of all children born in the county; 10.7% of all White babies and 15.0% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 77.2% were born to single mothers.

In 1994, 139 babies were born to mothers younger than age 20. These babies were 32.3% of all children born in the county; 32.2% of all White babies and 32.4% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 73.4% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 150 babies, 34.8% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 60.4% in 1970.

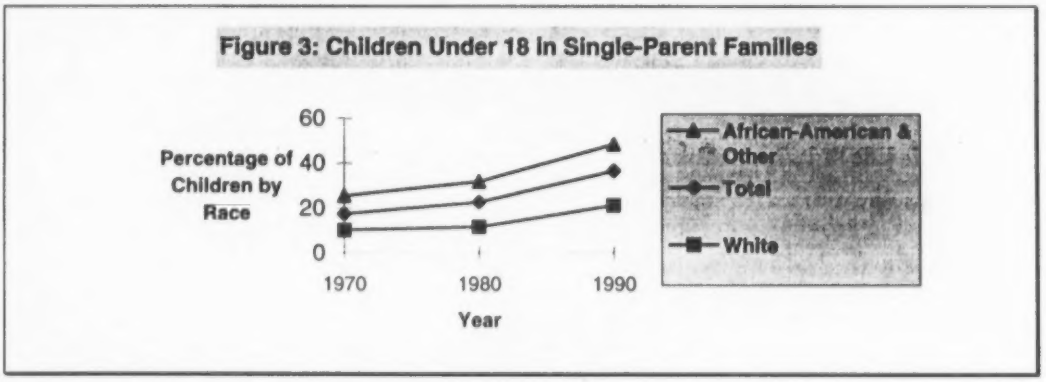
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 231 babies, 53.6% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 46.2% and in 1960 it was 21.8%. In 1994, 31.1% of White children and 69.6% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 47 babies, 10.9% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 278, constituting 64.5% of all babies, 41.2% of White babies, and 81.0% of African-American and Others.



Divorce Rate: In 1994, 878 marriage licenses were issued, while 80 divorce decrees involving 80 children were filed. In 1970 only 43 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 2,469 children lived with only one parent. This was 36.6% of all children, up from 22.7% in 1980 and 17.3% in 1970. In 1990, 21.3% of White children and 48.4% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 69.2% of mothers with children under 6 and 78.8% with children 6 - 17 were in the labor force. This has increased substantially from 41.6% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 388 children investigated as alleged child abuse and neglect victims: 16.8% for physical abuse, 9.5% for sexual abuse, 74.2% for neglect, and 23.5% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 187 children were victims of abuse and neglect: of these 44.4% were male and 55.6% were female; 42.8% were White, and 57.2% were African-American and Other. By age, 32.6% were 0 - 5, 53.5% were 6 - 12, and 13.9% were 13 - 17. They constituted 2.2% of all children age 18 or younger; 2.4% of all Whites and 2.1% of all African-Americans and Others. In the verified cases, 15.0% of abused and neglected children lived in two parent families, 59.4% in single parent families, 6.4% with extended families, and 19.3% in other circumstances.

Family Violence: In 1994, 291 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 26.0% of all assaults, which include both simple and aggravated assaults. Overall, 51.9% of all domestic assaults involve spouse abuse (constituting 13.2% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 5.9% of all children did not live with their natural parents; of these, 400 or 4.7% of children lived with relatives, 89 or 1.0% lived with non-relatives, and 18 were in institutional facilities.

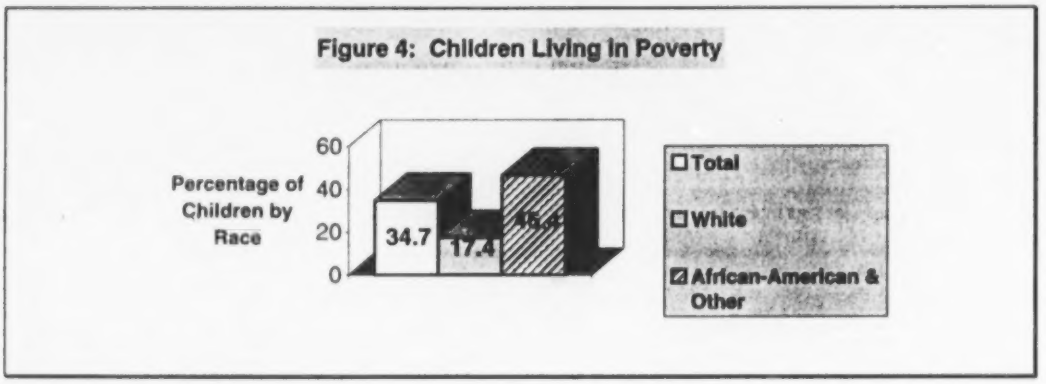
Out of Home Placements: As of September 30, 1996, 34 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 14.7% 0-2, 11.8% 3-5, 41.2% 6-10, 14.7% 11-13, and 17.6% 14 and above. The foster care population is comprised of 38.2% males and 61.8% females. Regarding their future, 73.5% were under a plan for placement in adoptive homes, 20.6% for return to a parent or guardian, 0.0% for placement with a relative, 2.9% for independent living, 2.9% for permanent foster care, and 0.0% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.5 adults for every person below age 18. This was up substantially from 1960, when there were only 1.18 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 2,919 children and youth under the age of 18 lived in families with incomes below poverty. Over 34.7% of all children and youth lived below poverty: 17.4% of Whites and 46.4% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 34.7% in 1989, it was 31.1% in 1979 and 40.2% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 39.7% of children 0 - 5 and 32.4% of children 6 - 17 lived in poverty; 32.9% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 56.9% of children in single-parent families lived in poverty, but only 19.5% of children in married-couple families were poor. Children in single-parent families made up 66.2% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 3,668 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 749 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	8,421	2,919	3,668	4,412	5,060	5,350	5,613
Percent		34.7%	43.6%	52.4%	60.1%	63.5%	66.7%
White	3,402	592	918	1,210	1,399	1,489	1,618
Percent		17.4%	27.0%	35.6%	41.1%	43.8%	47.6%
African-American and Other	5,019	2,327	2,750	3,202	3,661	3,861	3,995
Percent		46.4%	54.8%	63.8%	72.9%	76.9%	79.6%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 20.1% of households did not have a car; 11.4% of Whites and 30.8% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 19.6% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 38.7% of households had no phone.

Income: The mean income of families with children in 1989 was $26,152; in 1979, it had been $27,764, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 9.6%.

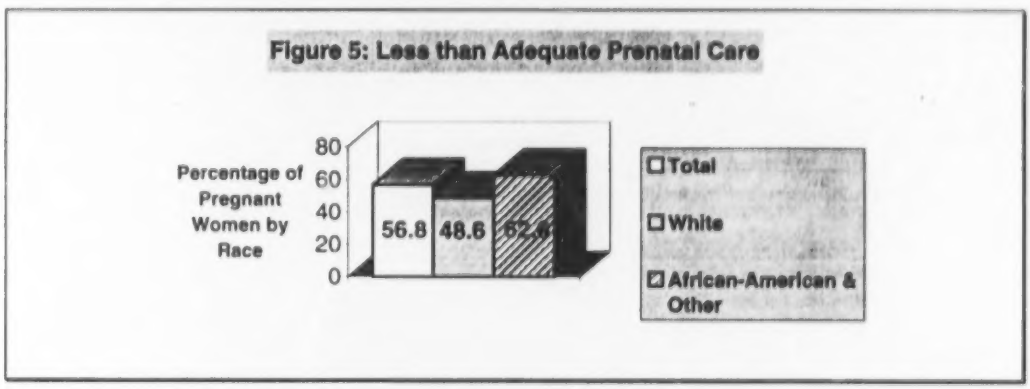
The mean income of single-parent families with children was $12,573 in 1989, as compared with $33,115 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 732 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 45.2% had child support court orders. The average monthly payment of child support was $126.44, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 193 parents in non-AFDC families were obligated to pay a monthly average of $146.60. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 208 or 48.3% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 245 or 56.8% of pregnant women received less than adequate prenatal care: 86 or 48.6% of Whites and 159 or 62.6% of African-Americans and Others. In that same year, 7 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 47 or 10.9% of all babies in the county were born with low birthweight. Over 9.9% of African-American babies and 12.4% of White babies were born with low birthweight. During 1992-94, approximately 30 or 2.1% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 41.0%. For Whites, the rate decreased by 29.5%, while for African-Americans and Others, the rate decreased by 49.8%. Over the three-year period 1992-94, 9 White and 8 African-American and Other infants died before age one. By comparison, 14 White and 16 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 1 White and 7 African-American and Other children ages 1-14 died in the county. During 1982-84, 2 White and 6 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 55.6% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 7.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 351 to 527 youth ages 13-19 in the county were infected with a STD. In the county, there was 1 reported case of children under age 15 and 38 youth ages 15 - 19 infected with gonorrhea; 1 youth ages 15 - 19 was reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 10.1% first smoked by age 11, 24.6% by age 13, and 37.7% by age 15. In a typical month, 13.8% of 7th and 8th graders and 16.5% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 28.5% of White 7th to 12th graders used cigarettes, in comparison with 9.2% African-Americans. A smaller but significant group of high school students (4.6%) used smokeless tobacco monthly; it was used primarily by White males (23.4%) compared with 0.8% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 857 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 245 students in grades 1-12 with learning disabilities and 108 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 584 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 1,268 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 8 nurses; 3 are currently available.

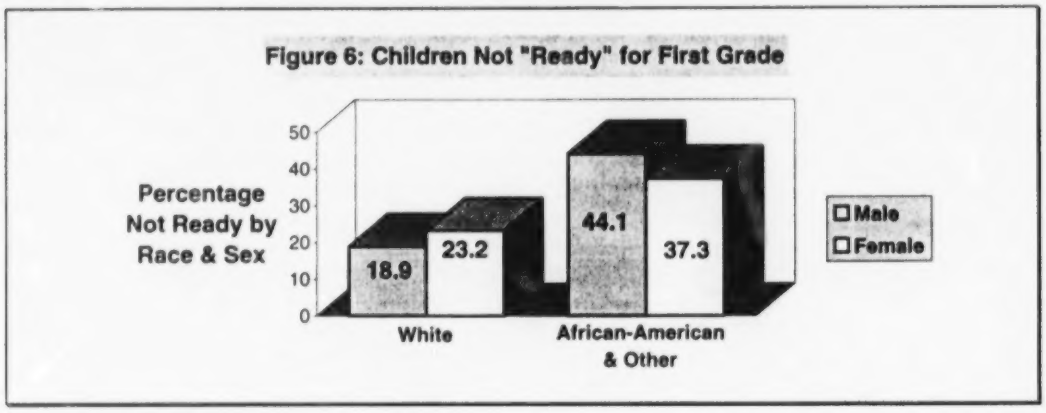
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 33.7% for Whites and 28.0% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

156 children not ready	**33.5% children not ready**

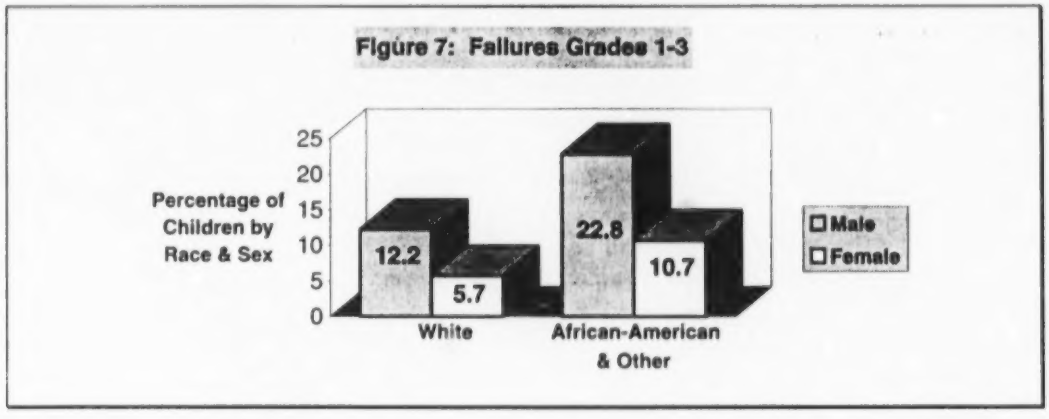


1st Grade Failures in 1995:

25 children failing	**5.4% children failing**

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

64 children failing	**14.2% children failing**



Overage for Grade 3 in 1996:

51 children overage	13.6% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 105 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 12.5% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 33.5% assessed not ready for the 1st grade, 13.6% overage in grade 3, and 12.5% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

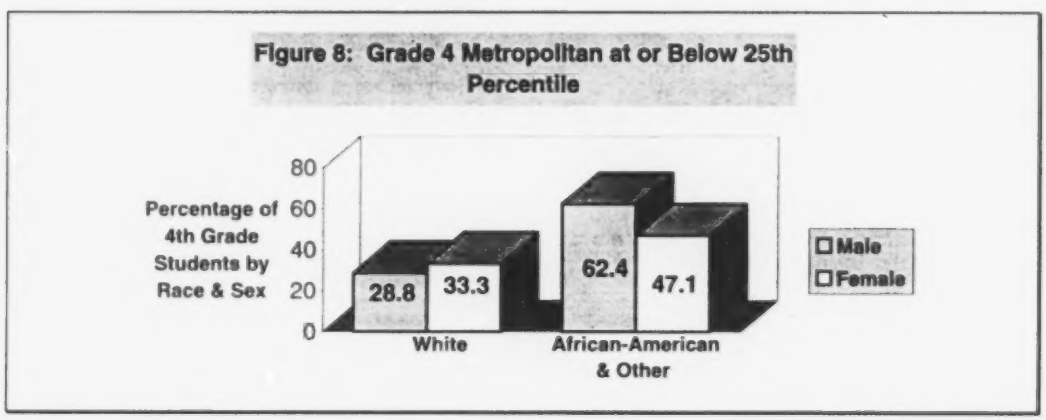
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 108 speech and language impaired, 245 learning disabled, 30 emotionally disabled, 227 mentally impaired, and 16 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 12.3% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996
(i.e. below 75% of students nationwide)

196 children at or below 25th percentile	46.0% children at or below 25th percentile



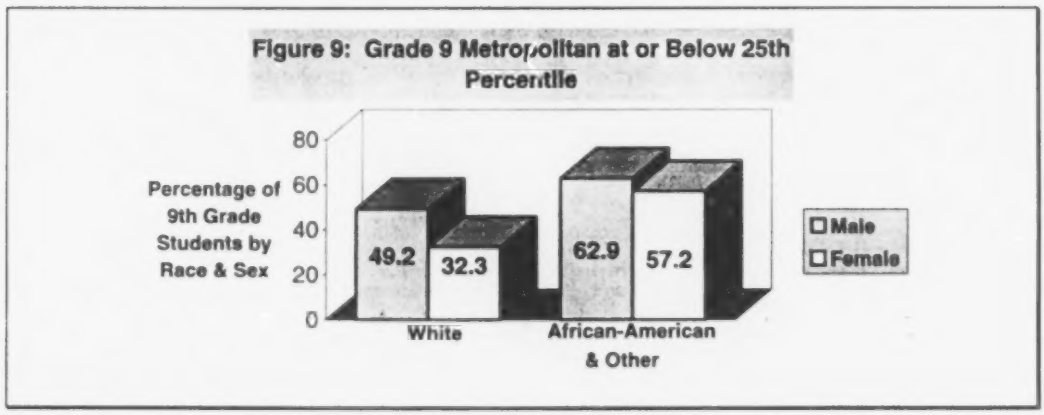
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	216	51.8	201	48.2
White Males	26	33.8	32	41.6
White Females	30	39.5	24	31.6
African-American & Other Males	85	60.3	84	59.6
African-American & Other Females	75	61.0	61	49.6

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

222 students at or below 25th percentile

54.0% students at or below 25th percentile

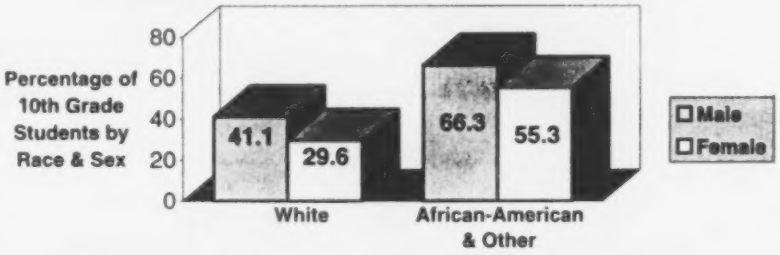


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

176 students not passing all parts

52.2% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam

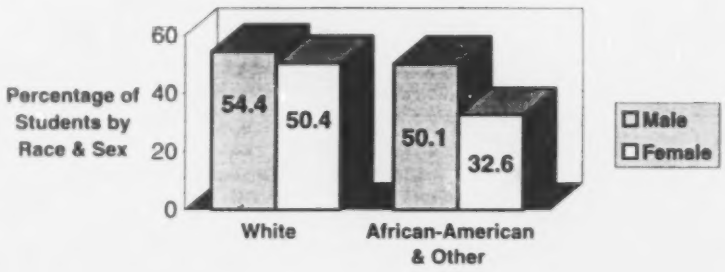


Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 75.4% to 43.4% in math and from 69.7% to 44.4% in reading. During the 1990s the trend altered, with 51.8% not meeting 8th grade math standards in 1996 and 48.2% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 50.5% in 1983 on the CTBS, 54.7% in 1990 on the Stanford, and 48.2% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 49.6% in 1990 and 50.8% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

1,002 students drop out	45.6% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 32.1% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 32.6% during 1985-89, and 43.7% during 1990-94. During the 1995-96 period, 94.8% of all who did graduate received the State High School Diploma, while 3.2% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 2.0% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 69 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 19 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 28.9% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 45.6% to 54.0%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 357 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 17.5% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

13.0%	White Males	20.2%	African-American & Other Males
14.5%	White Females	20.2%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 75 girls between the ages of 14 and 17 became pregnant in 1993 and 60 in 1994. In 1994, this represented 6.1% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 5.5% for Whites and 6.6% for African-Americans and others. Of all pregnancies to 14-17 year olds, 93.3% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it increased by 4.3%.

Alcohol Use: In 1992-93, 20.0% of 7th and 8th graders and 33.0% of high schoolers said they had used alcohol in the past month. Of White males, 35.4% had used it in the past month, compared with 33.3% of African-American males; likewise, 26.0% of White females said they had used alcohol, compared with 20.5% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 12.0% had used alcohol by age 11 or younger, 28.0% by age 13, and 50.1% by age 15.

During the previous year, 36.8% of 7th and 8th graders and 46.7% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 27.7% said they had driven after drinking, and 17.6% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 44.7% of eighth graders and 87.6% of seniors felt that beer was easy to get; 47.5% of eighth graders and 45.3% of seniors felt there was not a great risk in using it regularly.

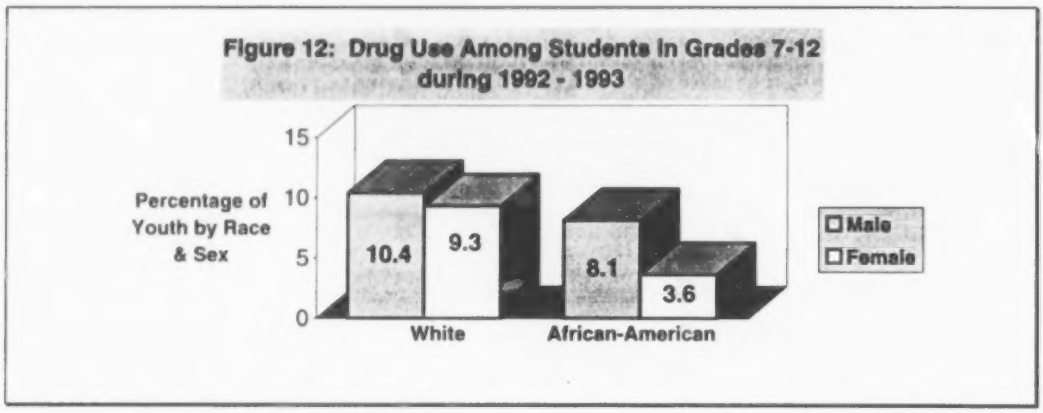
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 22.1% of all high school students in 1992-93 responded 3 or more drinks at a time; 12.7% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 5.7% of 7th and 8th graders and 7.9% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (10.4%) and White females (9.3%); use among African-American males was 8.1%; African-American females, 3.6%. Some young people first used drugs at an early age: among students 15 and older, 3.1% experienced their first use by age 11 or sooner; 5.3% had used a drug by age 13, and 11.9% by age 15.

Of seniors who had initiated use of marijuana, 12.3% had started use at home, 39.0% at a friend's home, and 48.7% elsewhere. During the past year, 2.0% of all high school students said that they used marijuana at home, 5.2% at a friend's house, and 4.7% in a car. In the past year, 4.0% of all high school students who drive and 6.3% of seniors who drive said that they had driven after using drugs . Furthermore, 3.6% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 21.0% of 8th graders who had an opinion said it is easy to get marijuana and 16.4% said it is easy to get cocaine or crack; 70.5% of seniors who had an opinion said it is easy to get marijuana and 65.3% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 12.8% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 362 individual juvenile offenders in the county were referred to the Solicitor; of these, 19.6% were age 12 or younger, 27.6% were 13 or 14, and 52.8% were 15 or older.

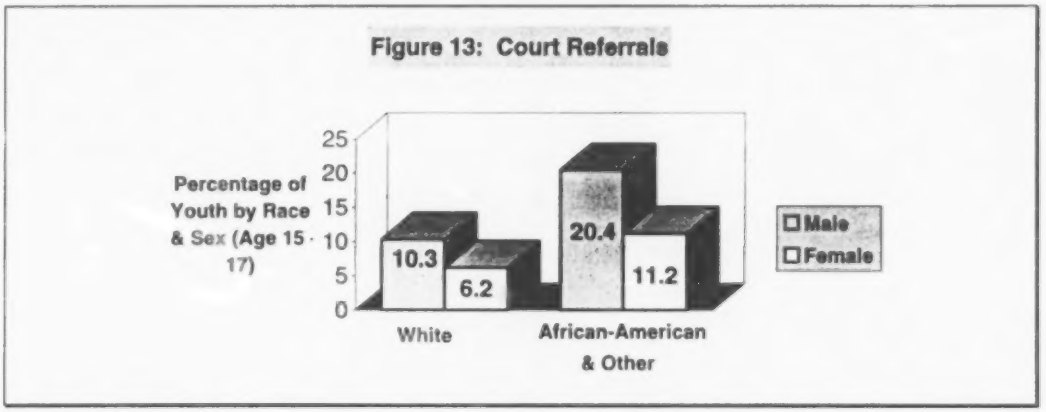
Of the referrals to the family court, 11.8% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 202 juvenile cases constituting 46.0% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 61.5% lived in families with income under $10,000, 26.1% with $10,000-$19,999 and 12.4% with $20,000 or more. Furthermore, only 22.9% of delinquents lived with both natural parents, while 52.9% lived in a single parent household and 24.2% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 24.1% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 18.5% had at least one prior referral and 4.1% had been referred to court 3 times or more.

In 1994-95, there were 9 juvenile commitments from the county to State institutions.

During 1994-95, 191 youth ages 15 to 17 were referred to the family courts. In the county, 12.8% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 11 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 5 deaths between 1990 and 1994; homicides killed 5 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 36.6% of children in single-parent families, 34.7% in poverty, 45.6% dropping out of school, 33.0% of high school students using alcohol and 12.8% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

Dr. A. Baron Holmes (803-734-2291) E-mail bholmes@ogc.state.sc.us
-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

MARLBORO

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	57	13.2	7.3	1.81	44	1994
Births to Mothers Not Completing High School	150	34.8	21.8	1.60	45	1994
Births to Single Mothers	231	53.6	30.4	1.76	45	1994
Children in Single-Parent Families	2,469	36.6	25.1	1.46	44	1990
Parents Working	2,530	76.2	74.3	1.03	30	1990
Abuse & Neglect Victims	187	2.2	1.0	2.20	46	1995-96
Separation from Parents	507	5.9	5.1	1.16	26	1990
Economic Status						
Poor Children	2,919	34.7	21.0	1.65	38	1989
Mean Income of Families with Children	$26,152	NA	NA	0.74	44	1989
Health						
Less than Adequate Prenatal Care	245	56.8	32.0	1.78	46	1994
Low Birth Weight	47	10.9	9.2	1.18	34	1994
Not Adequately Immunized	51	7.0	18.0	0.39	5	1995
Cigarette Smokers (High School)	231	16.5	23.1	0.71	12	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	156	33.5	28.1	1.19	36	1994-95
1st Grade Failures	25	5.4	6.8	0.79	15	1994-95
Failures grades 1-3 (approx. %)	64	14.2	11.3	1.26	29	1994-95
Overage for Grade 3	51	13.6	16.2	0.84	12	1995-96
Special Education (ages 8 and 9)	105	12.5	15.3	0.82	10	1995-96
School Achievement						
Special Education Grades 1 - 12	626	12.3	13.0	0.95	12	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	196	46.0	27.9	1.65	41	1995-96
Grade 8 BSAP - Math (Below standards)	216	51.8	34.8	1.49	43	1995-96
Grade 8 BSAP - Reading (Below standards)	201	48.2	28.8	1.67	42	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	222	54.0	29.5	1.83	45	1995-96
Exit Exam (Not passing all parts on 1st attempt)	176	52.2	35.3	1.48	39	1995-96
Dropout Rate	1,002	45.6	27.3	1.67	46	1992-95
25-34 Year olds with no HS Degree or GED	1,320	28.9	19.1	1.51	39	1990
Adolescent Risk Behavior						
Not in School or Employed	357	17.5	9.6	1.82	45	1990
Pregnancy (Ages 14 - 17)	60	6.1	4.8	1.27	34	1994
Alcohol Use (High School)	463	33.0	37.4	0.88	12	1992-93
Drug Use (High School)	111	7.9	12.8	0.62	17	1992-93
Binge Drinking (5 or more drinks)	178	12.7	16.3	0.78	13	1992-93
Delinquency (ages 15 - 17)	191	12.8	6.4	2.00	46	1994-95

* 1 = "best" 46 = "worst"

MARLBORO TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	63	12.3	1.86	1992	70	14.3	2.17	1993	57	13.2	1.81	1994
Births to Mothers Not Completing High School	163	31.8	1.35	1992	171	34.9	1.56	1993	150	34.8	1.60	1994
Births to Single Mothers	255	49.8	1.64	1992	246	50.2	1.66	1993	231	53.6	1.76	1994
Children in Single-Parent Families		17.3	1.19	1970		22.7	1.20	1980	2,469	36.6	1.46	1990
Economic Status												
Poor Children		40.2	1.40	1969		31.1	1.47	1979	2,919	34.7	1.65	1989
Mean Income of Families with Children					27,764	N/A	1.19	1979	26,152	N/A	1.36	1989
Health												
Less than Adequate Prenatal Care	354	69.1	1.75	1992	333	68.0	1.93	1993	245	56.8	1.78	1994
Low Birth Weight	48	9.4	1.04	1992	63	12.9	1.39	1993	47	10.9	1.18	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	204	36.8	1.38	1990-91	163	35.7	1.28	1992-93	156	33.5	1.19	1994-95
1st Grade Failures	39	7.3	0.81	1991-92	54	11.0	1.13	1992-93	25	5.4	0.79	1994-95
Failures Grades 1-3 (approx. %)	54	10.7	0.76	1991-92	81	17.7	1.24	1992-93	64	14.2	1.26	1994-95
Overage for Grade 3	110	25.2	0.97	1991-92	84	17.8	0.87	1993-94	51	13.6	0.84	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	121	27.5	1.42	1991-92	132	31.7	1.60	1993-94	196	46.0	1.65	1995-96*
Grade 8 BSAP - Math (Below Standards)	153	35.9	1.33	1991-92	205	44.5	1.44	1993-94	216	51.8	1.49	1995-96
Grade 8 BSAP - Reading (Below Standards)	181	42.7	1.75	1991-92	226	48.9	1.70	1993-94	201	48.2	1.67	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	238	47.1	2.15	1991-92	208	44.8	1.84	1993-94	222	54.0	1.83	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	174	48.5	1.56	1991-92	190	53.2	1.63	1993-94	176	52.2	1.48	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	74	7.7	1.64	1992	75	8.0	1.78	1993	60	6.1	1.27	1994
Alcohol Use (High School)	502	30.5	0.76	1989-90					463	33.0	0.88	1992-93
Drug Use (High School)	184	11.2	0.84	1989-90					111	7.9	0.62	1992-93
Binge Drinking (5 or more drinks)		12.1	0.78	1989-90					178	12.7	0.78	1992-93

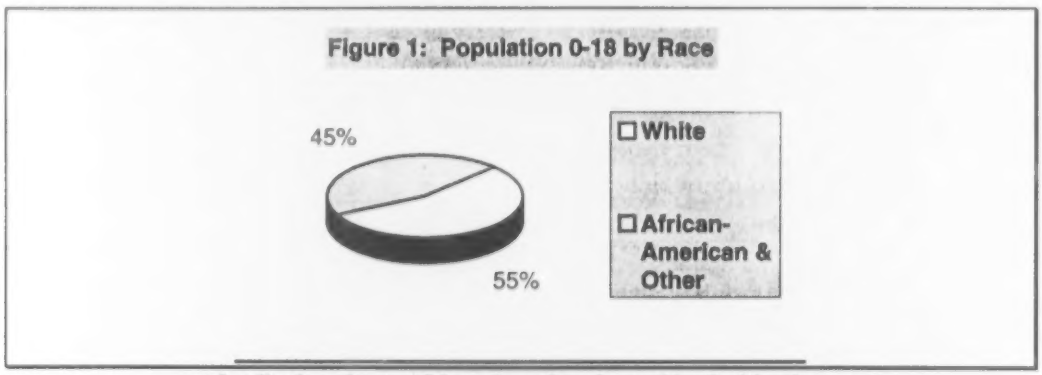
SOUTH CAROLINA kids count

1996 Report NEWBERRY

DEMOGRAPHICS

In 1994, there were 8,600 children under age 18 in the county. Of these, 4,730 were White and 3,870 were African-American and Other races. There were 8,470 children under age 18 in 1980, 9,516 in 1970, and 10,704 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 25.4% of the population in 1994, down from 36.4% in 1960, 32.5% in 1970 and 27.1% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 33.0% of all households in 1990, as compared with 39.0% of households in 1960, had children below the age of 18.

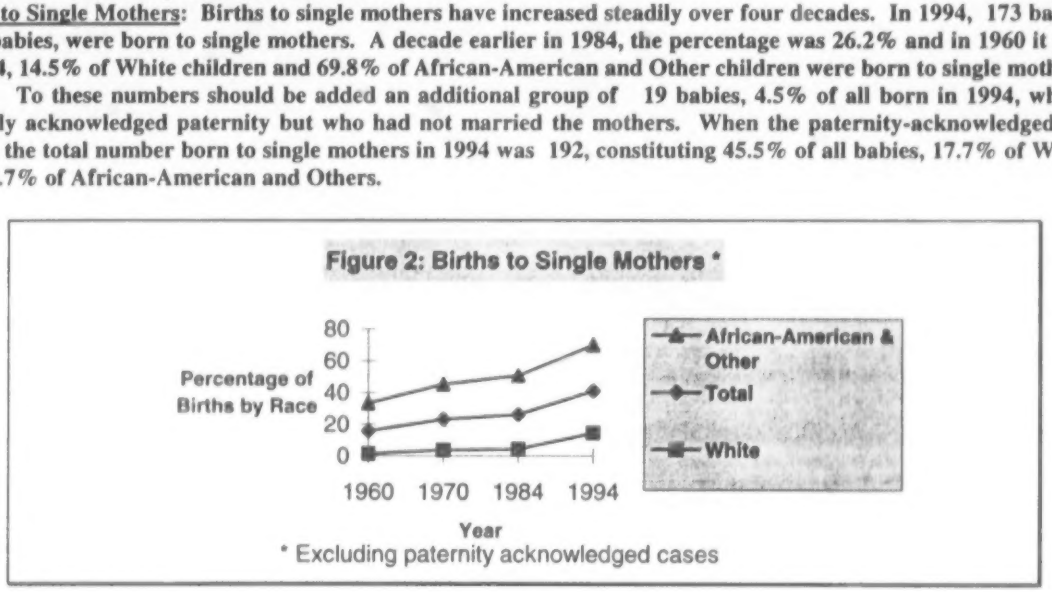
Births to Teen Mothers: In 1994, 40 babies were born to mothers younger than age 18. These babies were 9.5% of all children born in the county; 5.9% of all White babies and 13.4% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 85.0% were born to single mothers.

In 1994, 74 babies were born to mothers younger than age 20. These babies were 17.5% of all children born in the county; 15.0% of all White babies and 20.3% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 74.3% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 113 babies, 26.8% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 49.8% in 1970.

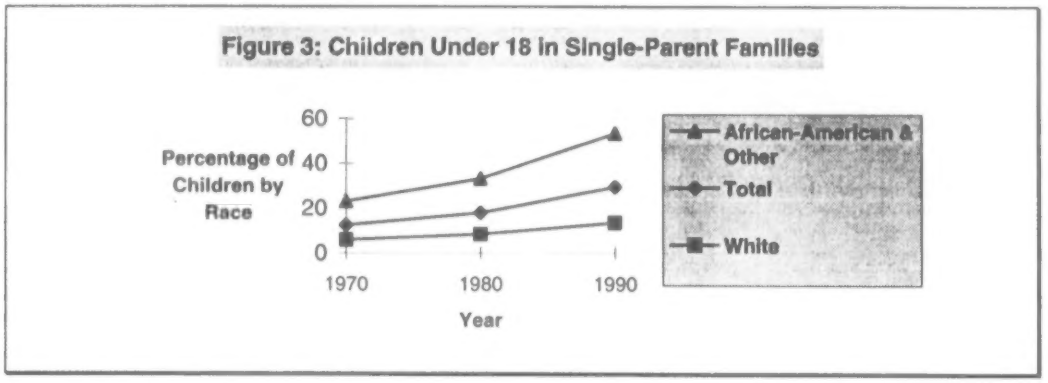
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 173 babies, 41.0% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 26.2% and in 1960 it was 15.8%. In 1994, 14.5% of White children and 69.8% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 19 babies, 4.5% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 192, constituting 45.5% of all babies, 17.7% of White babies, and 75.7% of African-American and Others.



Divorce Rate: In 1994, 308 marriage licenses were issued, while 128 divorce decrees involving 110 children were filed. In 1970 only 65 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 2,125 children lived with only one parent. This was 29.5% of all children, up from 17.9% in 1980 and 12.4% in 1970. In 1990, 13.6% of White children and 53.4% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 73.0% of mothers with children under 6 and 79.0% with children 6 - 17 were in the labor force. This has increased substantially from 48.2% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 44 children investigated as alleged child abuse and neglect victims: 50.0% for physical abuse, 2.3% for sexual abuse, 40.9% for neglect, and 25.0% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 23 children were victims of abuse and neglect: of these 60.9% were male and 39.1% were female; 34.8% were White, and 65.2% were African-American and Other. By age, 52.2% were 0 - 5, 34.8% were 6 - 12, and 13.0% were 13 - 17. They constituted 0.3% of all children age 18 or younger; 0.2% of all Whites and 0.4% of all African-Americans and Others. In the verified cases, 13.0% of abused and neglected children lived in two parent families, 43.5% in single parent families, 34.8% with extended families, and 8.7% in other circumstances.

Family Violence: In 1994, 177 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 22.0% of all assaults, which include both simple and aggravated assaults. Overall, 49.2% of all domestic assaults involve spouse abuse (constituting 10.9% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 5.5% of all children did not live with their natural parents; of these, 361 or 4.3% of children lived with relatives, 92 or 1.1% lived with non-relatives, and 6 were in institutional facilities.

Out of Home Placements: As of September 30, 1996, 35 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 20.0% 0-2, 8.6% 3-5, 37.1% 6-10, 14.3% 11-13, and 20.0% 14 and above. The foster care population is comprised of 51.4% males and 48.6% females. Regarding their future, 8.6% were under a plan for placement in adoptive homes, 48.6% for return to a parent or guardian, 8.6% for placement with a relative, 5.7% for independent living, 25.7% for permanent foster care, and 2.9% for other circumstances.

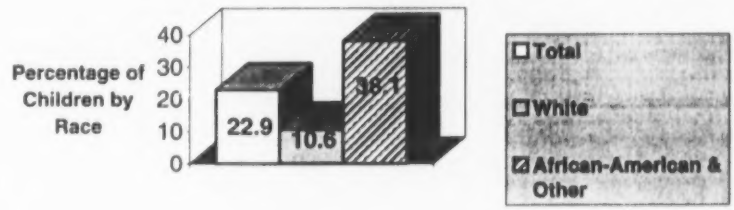
Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.93 adults for every person below age 18. This was up substantially from 1960, when there were only 1.75 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 1,897 children and youth under the age of 18 lived in families with incomes below poverty. Over 22.9% of all children and youth lived below poverty: 10.6% of Whites and 38.1% of African-Americans and others.

Figure 4: Children Living in Poverty



Poverty has always been a serious problem. While the rate among children under age 18 was 22.9% in 1989, it was 13.9% in 1979 and 23.8% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 27.2% of children 0 - 5 and 20.9% of children 6 - 17 lived in poverty; 19.7% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 46.5% of children in single-parent families lived in poverty, but only 11.3% of children in married-couple families were poor. Children in single-parent families made up 65.9% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 2,506 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 609 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	8,278	1,897	2,506	3,072	3,592	3,918	4,178
Percent		22.9%	30.3%	37.1%	43.4%	47.3%	50.5%
White	4,575	486	672	825	1,064	1,154	1,381
Percent		10.6%	14.7%	18.0%	23.3%	25.2%	30.2%
African-American and Other	3,703	1,411	1,834	2,247	2,528	2,764	2,797
Percent		38.1%	49.5%	60.7%	68.3%	74.6%	75.5%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 12.6% of households did not have a car; 6.7% of Whites and 26.1% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 12.1% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 29.1% of households had no phone.

Income: The mean income of families with children in 1989 was $31,120; in 1979, it had been $33,531, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 2.4%.

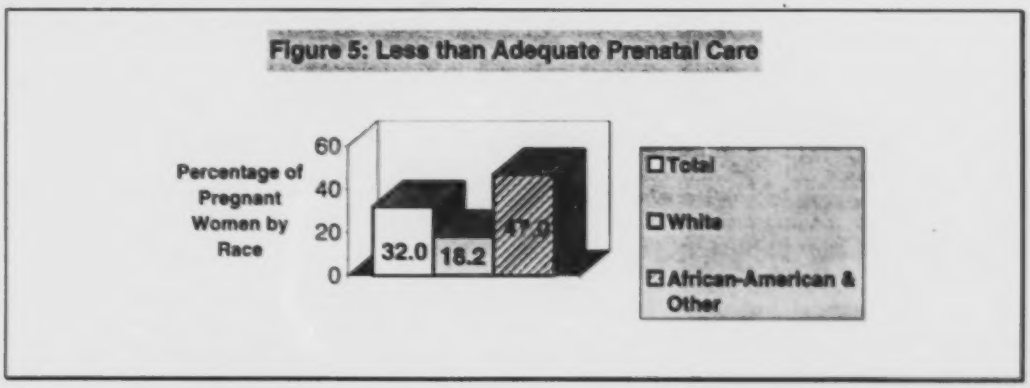
The mean income of single-parent families with children was $15,608 in 1989, as compared with $36,921 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 462 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 50.9% had child support court orders. The average monthly payment of child support was $165.29, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 337 parents in non-AFDC families were obligated to pay a monthly average of $171.73. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 107 or 25.4% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 135 or 32.0% of pregnant women received less than adequate prenatal care: 40 or 18.2% of Whites and 95 or 47.0% of African-Americans and Others. In that same year, 12 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 41 or 9.7% of all babies in the county were born with low birthweight. Over 11.9% of African-American babies and 7.7% of White babies were born with low birthweight. During 1992-94, approximately 25 or 1.8% of all babies were born with very low birthweight.

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Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 40.7%. For Whites, the rate increased by 49.1%, while for African-Americans and Others, the rate decreased by 66.7%. Over the three-year period 1992-94, 7 White and 6 African-American and Other infants died before age one. By comparison, 5 White and 17 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 1 White and 2 African-American and Other children ages 1-14 died in the county. During 1982-84, 3 White and 3 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 54.6% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 6.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 360 to 540 youth ages 13-19 in the county were infected with a STD. In the county, there were 5 reported cases of children under age 15 and 22 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 13.3% first smoked by age 11, 30.8% by age 13, and 43.5% by age 15. In a typical month, 13.7% of 7th and 8th graders and 25.5% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 30.5% of White 7th to 12th graders used cigarettes, in comparison with 7.9% African-Americans. A smaller but significant group of high school students (10.6%) used smokeless tobacco monthly; it was used primarily by White males (29.1%) compared with 1.5% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 860 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 387 students in grades 1-12 with learning disabilities and 242 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 582 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 1,273 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 8 nurses; 1 are currently available.

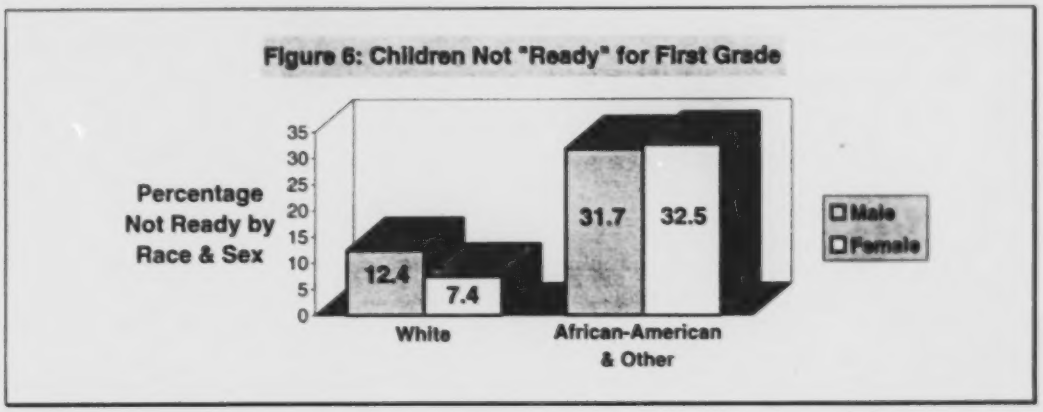
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 28.7% for Whites and 30.5% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

95 children not ready	21.9% children not ready

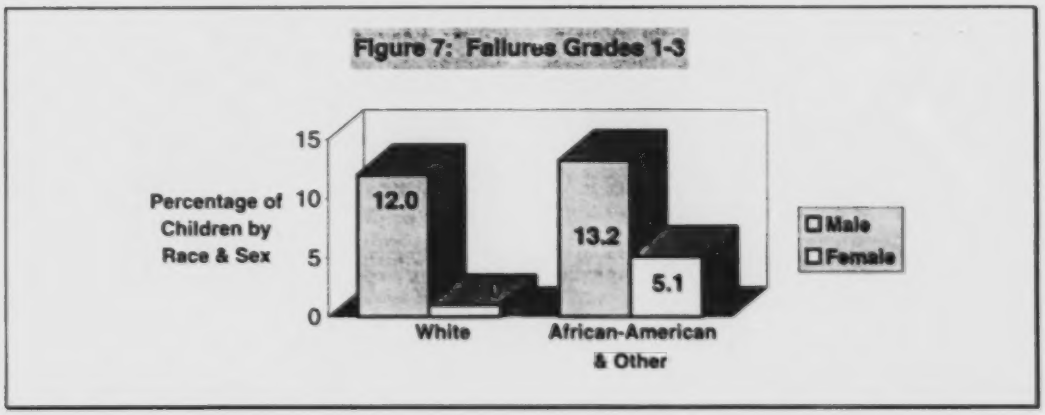


1st Grade Failures in 1995:

12 children failing	2.7% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

37 children failing	8.3% children failing



Overage for Grade 3 in 1996:

39 children overage	9.9% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 154 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 17.7% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 21.9% assessed not ready for the 1st grade, 9.9% overage in grade 3, and 17.7% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

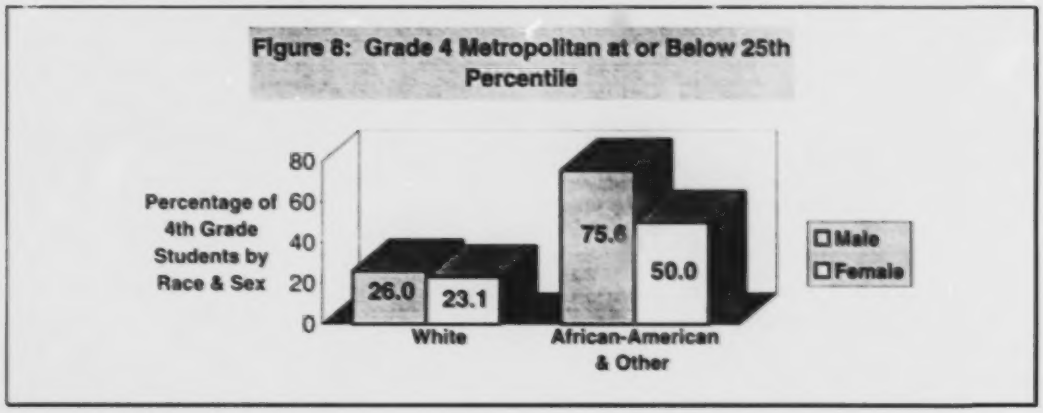
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 242 speech and language impaired, 387 learning disabled, 39 emotionally disabled, 161 mentally impaired, and 1 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 16.0% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

173 children at or below 25th percentile	43.6% children at or below 25th percentile



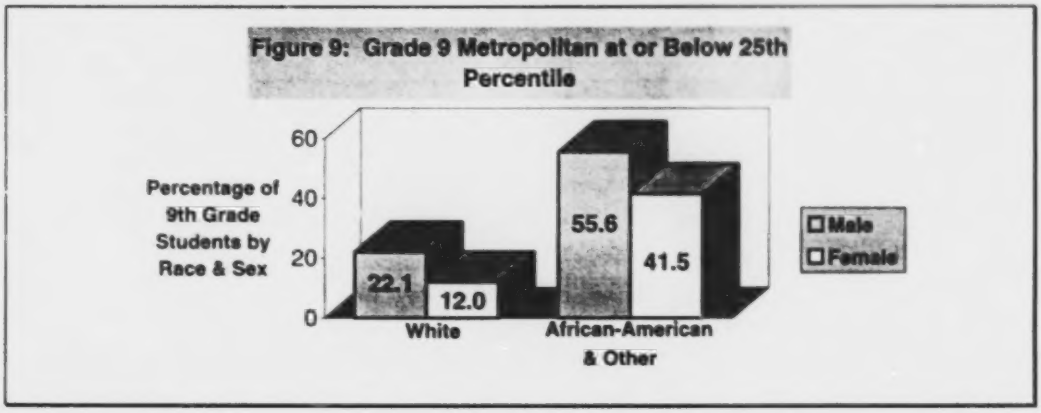
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	166	38.1	151	34.9
White Males	29	24.4	31	26.3
White Females	21	17.2	15	12.4
African-American & Other Males	47	58.8	53	65.4
African-American & Other Females	69	60.0	52	46.0

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

167 students at or below 25th percentile

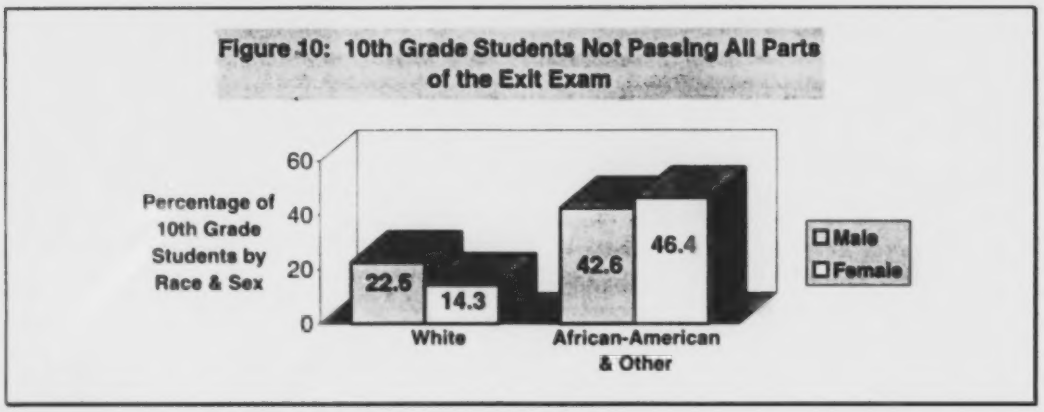
32.7% students at or below 25th percentile



Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

97 students not passing all parts

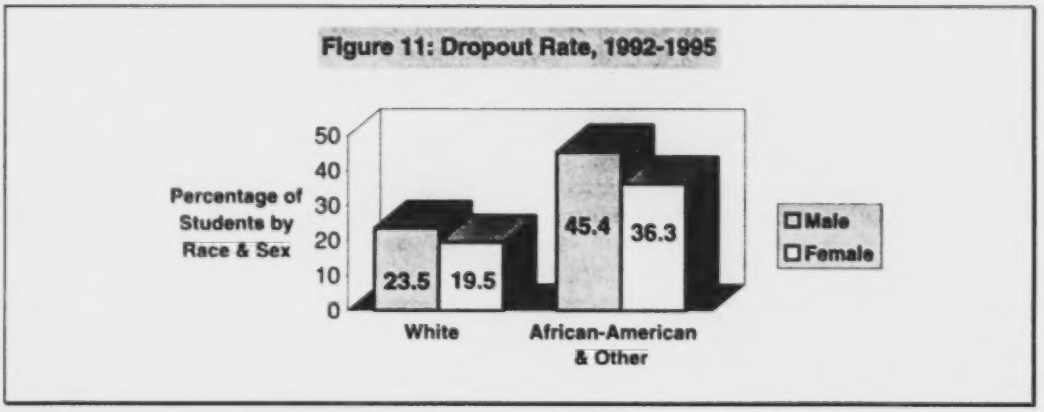
29.8% students not passing all parts



Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 53.7% to 33.7% in math and from 45.1% to 26.5% in reading. During the 1990s the trend altered, with 38.1% not meeting 8th grade math standards in 1996 and 34.9% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 39.2% in 1983 on the CTBS, 34.5% in 1990 on the Stanford, and 48.2% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 27.8% in 1990 and 23.5% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

604 students drop out	30.1% students drop out



Dropouts: A distressing number of students drop out and fail to graduate. An average 35.3% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 35.7% during 1985-89, and 32.3% during 1990-94. During the 1995-96 period, 91.0% of all who did graduate received the State High School Diploma, while 2.4% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 6.6% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 20 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 53 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 27.9% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 29.8% to 43.6%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 220 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 9.9% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

7.1%	White Males	3.0%	African-American & Other Males
12.2%	White Females	18.3%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 36 girls between the ages of 14 and 17 became pregnant in 1993 and 51 in 1994. In 1994, this represented 5.1% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 3.7% for Whites and 6.6% for African-Americans and others. Of all pregnancies to 14-17 year olds, 72.5% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 22.5%.

Alcohol Use: In 1992-93, 24.4% of 7th and 8th graders and 43.9% of high schoolers said they had used alcohol in the past month. Of White males, 40.6% had used it in the past month, compared with 36.0% of African-American males; likewise, 39.1% of White females said they had used alcohol, compared with 28.5% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 17.5% had used alcohol by age 11 or younger, 39.1% by age 13, and 62.4% by age 15.

During the previous year, 33.6% of 7th and 8th graders and 45.4% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 33.9% said they had driven after drinking, and 11.9% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 61.2% of eighth graders and 86.0% of seniors felt that beer was easy to get; 54.2% of eighth graders and 49.6% of seniors felt there was not a great risk in using it regularly.

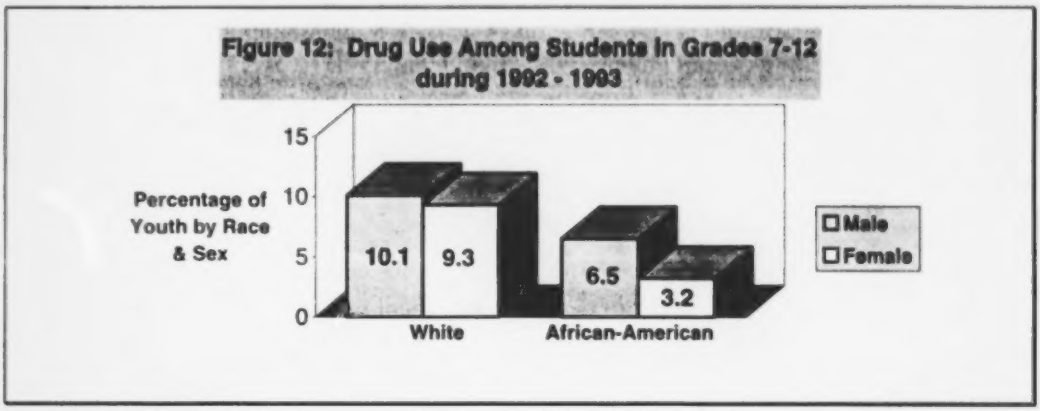
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 32.6% of all high school students in 1992-93 responded 3 or more drinks at a time; 19.4% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 4.6% of 7th and 8th graders and 9.5% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (10.1%) and White females (9.3%); use among African-American males was 6.5%; African-American females, 3.2%. Some young people first used drugs at an early age: among students 15 and older, 2.8% experienced their first use by age 11 or sooner; 7.3% had used a drug by age 13, and 15.1% by age 15.

Of seniors who had initiated use of marijuana, 11.3% had started use at home, 42.8% at a friend's home, and 45.9% elsewhere. During the past year, 3.0% of all high school students said that they used marijuana at home, 7.8% at a friend's house, and 4.7% in a car. In the past year, 5.4% of all high school students who drive and 9.5% of seniors who drive said that they had driven after using drugs . Furthermore, 4.6% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 21.8% of 8th graders who had an opinion said it is easy to get marijuana and 17.7% said it is easy to get cocaine or crack; 64.7% of seniors who had an opinion said it is easy to get marijuana and 48.2% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 15.4% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 175 individual juvenile offenders in the county were referred to the Solicitor; of these, 19.4% were age 12 or younger, 36.6% were 13 or 14, and 44.0% were 15 or older.

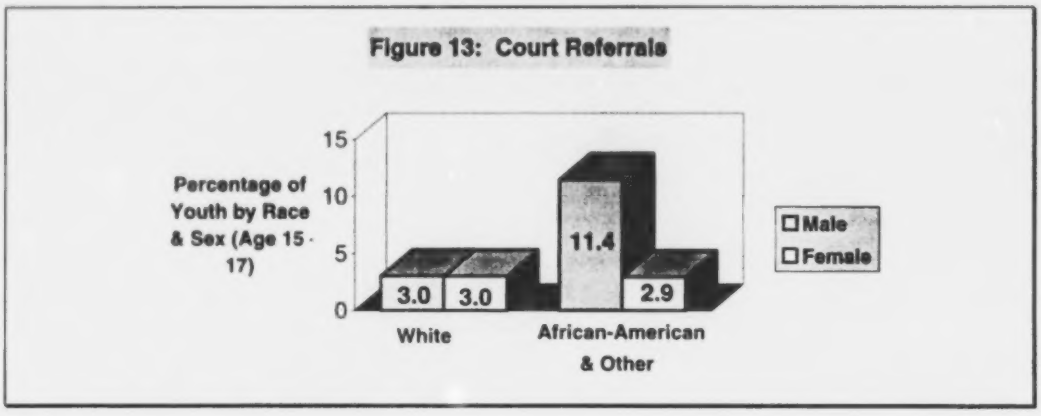
Of the referrals to the family court, 9.8% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 4 juvenile cases constituting 1.8% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 30.1% lived in families with income under $10,000, 35.0% with $10,000-$19,999 and 35.0% with $20,000 or more. Furthermore, only 15.9% of delinquents lived with both natural parents, while 51.8% lived in a single parent household and 32.3% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 47.6% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 33.1% had at least one prior referral and 10.3% had been referred to court 3 times or more.

In 1994-95, there were 14 juvenile commitments from the county to State institutions.

During 1994-95, 77 youth ages 15 to 17 were referred to the family courts. In the county, 4.9% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 17 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 5 deaths between 1990 and 1994; homicides killed 3 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 29.5% of children in single-parent families, 22.9% in poverty, 30.1% dropping out of school, 43.9% of high school students using alcohol and 15.4% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

Dr. A. Baron Holmes (803-734-2291) E-mail bholmes@ogc.state.sc.us
-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

NEWBERRY

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	40	9.5	7.3	1.30	29	1994
Births to Mothers Not Completing High School	113	26.8	21.8	1.23	30	1994
Births to Single Mothers	173	41.0	30.4	1.35	31	1994
Children in Single-Parent Families	2,125	29.5	25.1	1.18	28	1990
Parents Working	2,762	77.0	74.3	1.04	33	1990
Abuse & Neglect Victims	23	0.3	1.0	0.30	1	1995-96
Separation from Parents	459	5.5	5.1	1.08	22	1990
Economic Status						
Poor Children	1,897	22.9	21.0	1.09	23	1989
Mean Income of Families with Children	$31,120	NA	NA	0.88	26	1989
Health						
Less than Adequate Prenatal Care	135	32.0	32.0	1.00	21	1994
Low Birth Weight	41	9.7	9.2	1.05	26	1994
Not Adequately Immunized	35	6.0	18.0	0.33	2	1995
Cigarette Smokers (High School)	376	25.5	23.1	1.10	35	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	95	21.9	28.1	0.78	5	1994-95
1st Grade Failures	12	2.7	6.8	0.40	5	1994-95
Failures grades 1-3 (approx. %)	37	8.3	11.3	0.73	11	1994-95
Overage for Grade 3	39	9.9	16.2	0.61	6	1995-96
Special Education (ages 8 and 9)	154	17.7	15.3	1.16	36	1995-96
School Achievement						
Special Education Grades 1 - 12	830	16.0	13.0	1.23	39	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	173	43.6	27.9	1.56	40	1995-96
Grade 8 BSAP - Math (Below standards)	166	38.1	34.8	1.09	22	1995-96
Grade 8 BSAP - Reading (Below standards)	151	34.9	28.8	1.21	28	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	167	32.7	29.5	1.11	23	1995-96
Exit Exam (Not passing all parts on 1st attempt)	97	29.8	35.3	0.84	9	1995-96
Dropout Rate	604	30.1	27.3	1.10	31	1992-95
25-34 Year olds with no HS Degree or GED	1,414	27.9	19.1	1.46	36	1990
Adolescent Risk Behavior						
Not in School or Employed	220	9.9	9.6	1.03	18	1990
Pregnancy (Ages 14 - 17)	51	5.1	4.8	1.06	22	1994
Alcohol Use (High School)	648	43.9	37.4	1.17	44	1992-93
Drug Use (High School)	140	9.5	12.8	0.74	27	1992-93
Binge Drinking (5 or more drinks)	286	19.4	16.3	1.19	42	1992-93
Delinquency (ages 15 - 17)	77	4.9	6.4	0.77	9	1994-95

* 1 = "best" 46 = "worst"

NEWBERRY TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	34	7.1	1.08	1992	29	6.4	0.97	1993	40	9.5	1.30	1994
Births to Mothers Not Completing High School	135	28.2	1.19	1992	104	23.0	1.03	1993	113	26.8	1.23	1994
Births to Single Mothers	181	37.9	1.25	1992	175	38.6	1.27	1993	173	41.0	1.35	1994
Children in Single-Parent Families		12.4	0.86	1970		17.9	0.95	1980	2,125	29.5	1.18	1990
Economic Status												
Poor Children		23.8	0.83	1969		13.9	0.66	1979	1,897	22.9	1.09	1989
Mean Income of Families with Children					33,531	N/A	0.99	1979	31,120	N/A	1.14	1989
Health												
Less than Adequate Prenatal Care	184	38.5	0.97	1992	149	32.9	0.93	1993	135	32.0	1.00	1994
Low Birth Weight	49	10.3	1.14	1992	47	10.4	1.12	1993	41	9.7	1.05	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	99	21.2	0.80	1990-91	96	23.3	0.84	1992-93	95	21.9	0.78	1994-95
1st Grade Failures	25	5.4	0.60	1991-92	16	3.9	0.40	1992-93	12	2.7	0.40	1994-95
Failures Grades 1-3 (approx. %)	55	12.0	0.85	1991-92	40	9.7	0.68	1992-93	37	8.3	0.73	1994-95
Overage for Grade 3	106	22.8	0.88	1991-92	72	16.1	0.79	1993-94	39	9.9	0.61	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	128	29.2	1.51	1991-92	103	25.4	1.28	1993-94	173	43.6	1.56	1995-96*
Grade 8 BSAP - Math (Below Standards)	137	32.1	1.19	1991-92	124	30.1	0.97	1993-94	166	38.1	1.09	1995-96
Grade 8 BSAP - Reading (Below Standards)	99	23.3	0.95	1991-92	111	27.0	0.94	1993-94	151	34.9	1.21	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	124	25.4	1.16	1991-92	109	22.8	0.94	1993-94	167	32.7	1.11	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	136	36.8	1.18	1991-92	110	31.7	0.97	1993-94	97	29.8	0.84	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	52	5.2	1.11	1992	36	3.6	0.80	1993	51	5.1	1.06	1994
Alcohol Use (High School)	638	38.7	0.96	1989-90					648	43.9	1.17	1992-93
Drug Use (High School)	180	10.9	0.81	1989-90					140	9.5	0.74	1992-93
Binge Drinking (5 or more drinks)		12.4	0.79	1989-90					286	19.4	1.19	1992-93

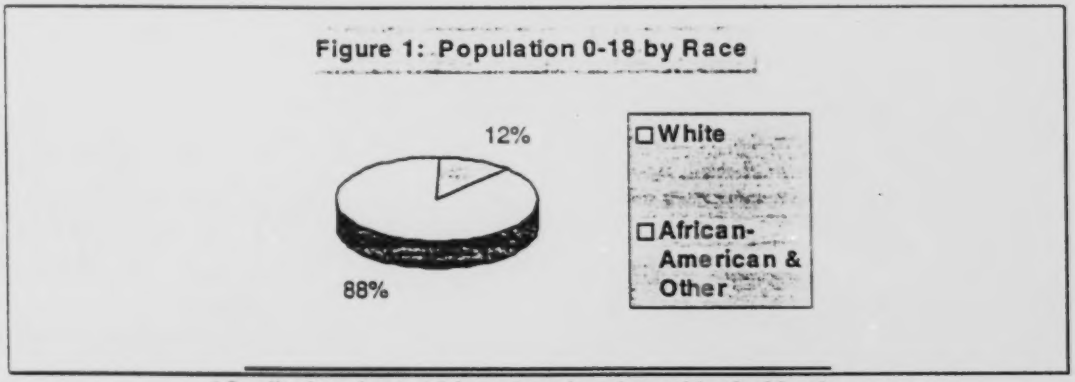
SOUTH CAROLINA kids count

1996 Report OCONEE

DEMOGRAPHICS

In 1994, there were 14,650 children under age 18 in the county. Of these, 12,900 were White and 1,750 were African-American and Other races. There were 14,205 children under age 18 in 1980, 14,162 in 1970, and 14,649 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 24.1% of the population in 1994, down from 36.4% in 1960, 34.8% in 1970 and 29.2% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 32.8% of all households in 1990, as compared with 46.0% of households in 1960, had children below the age of 18.

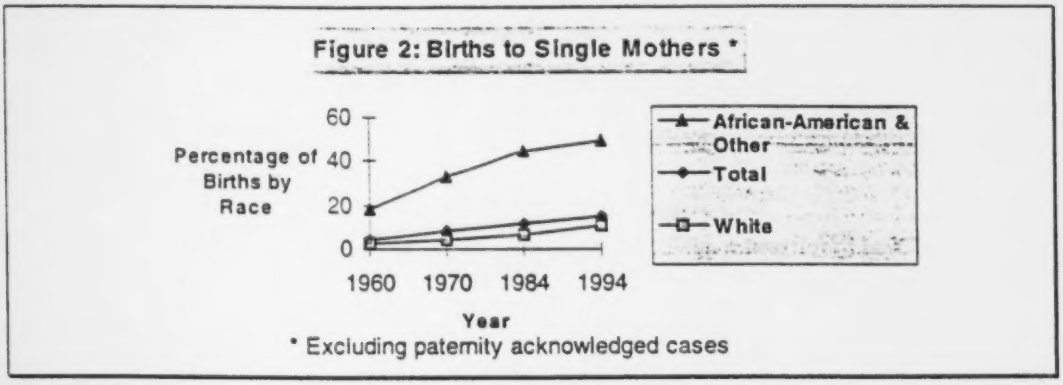
Births to Teen Mothers: In 1994, 48 babies were born to mothers younger than age 18. These babies were 6.9% of all children born in the county; 6.1% of all White babies and 12.9% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 35.4% were born to single mothers.

In 1994, 112 babies were born to mothers younger than age 20. These babies were 16.1% of all children born in the county; 15.4% of all White babies and 21.2% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 30.4% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 181 babies, 26.0% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 51.3% in 1970.

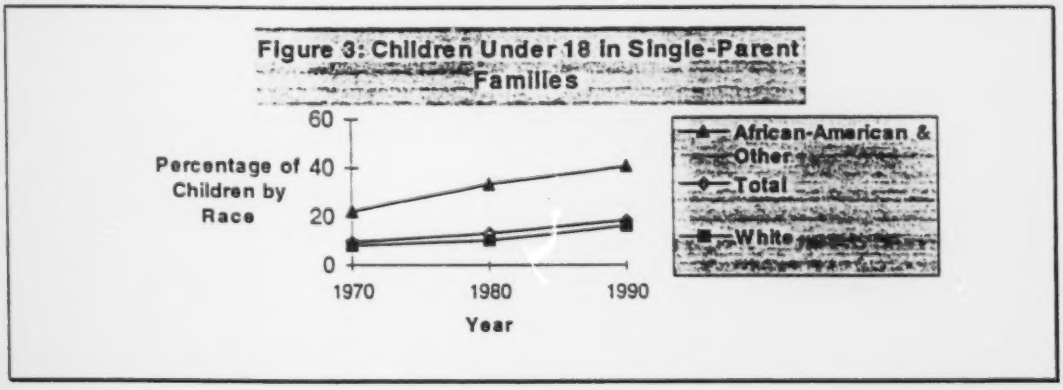
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 105 babies, 15.1% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 11.5% and in 1960 it was 4.4%. In 1994, 10.3% of White children and 49.4% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 81 babies, 11.7% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 186, constituting 26.8% of all babies, 22.0% of White babies, and 61.2% of African-American and Others.



Divorce Rate: In 1994, 1,839 marriage licenses were issued, while 282 divorce decrees involving 224 children were filed. In 1970 only 101 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 2,377 children lived with only one parent. This was 18.7% of all children, up from 13.3% in 1980 and 9.9% in 1970. In 1990, 16.1% of White children and 40.4% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 69.1% of mothers with children under 6 and 80.1% with children 6 - 17 were in the labor force. This has increased substantially from 49.7% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

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Abuse and Neglect: In 1995-96, there were 355 children investigated as alleged child abuse and neglect victims: 29.6% for physical abuse, 19.7% for sexual abuse, 56.6% for neglect, and 20.0% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 133 children were victims of abuse and neglect: of these 50.4% were male and 49.6% were female; 88.7% were White, and 11.3% were African-American and Other. By age, 39.1% were 0 - 5, 43.6% were 6 - 12, and 17.3% were 13 - 17. They constituted 0.9% of all children age 18 or younger; 0.9% of all Whites and 0.8% of all African-Americans and Others. In the verified cases, 39.1% of abused and neglected children lived in two parent families, 43.6% in single parent families, 3.0% with extended families, and 14.3% in other circumstances.

Family Violence: In 1994, 367 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 38.0% of all assaults, which include both simple and aggravated assaults. Overall, 60.2% of all domestic assaults involve spouse abuse (constituting 23.0% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 6.0% of all children did not live with their natural parents; of these, 565 or 4.0% of children lived with relatives, 183 or 1.3% lived with non-relatives, and 95 were in institutional facilities.

Out of Home Placements: As of September 30, 1996, 116 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 22.4% 0-2, 18.1% 3-5, 27.6% 6-10, 18.1% 11-13, and 13.8% 14 and above. The foster care population is comprised of 41.4% males and 58.6% females. Regarding their future, 19.8% were under a plan for placement in adoptive homes, 35.3% for return to a parent or guardian, 39.7% for placement with a relative, 2.6% for independent living, 1.7% for permanent foster care, and 0.9% for other circumstances.

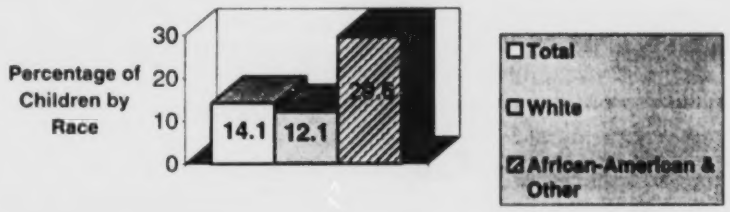
Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 3.14 adults for every person below age 18. This was up substantially from 1960, when there were only 1.74 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 1,949 children and youth under the age of 18 lived in families with incomes below poverty. Over 14.1% of all children and youth lived below poverty: 12.1% of Whites and 29.6% of African-Americans and others.

Figure 4: Children Living in Poverty



Poverty has always been a serious problem. While the rate among children under age 18 was 14.1% in 1989, it was 16.6% in 1979 and 18.9% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 16.6% of children 0 - 5 and 13.0% of children 6 - 17 lived in poverty; 17.6% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 39.1% of children in single-parent families lived in poverty, but only 6.8% of children in married-couple families were poor. Children in single-parent families made up 58.9% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 2,772 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 823 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	13,851	1,949	2,772	3,503	4,664	4,978	5,547
Percent		14.1%	20.0%	25.3%	33.7%	35.9%	40.0%
White	12,274	1,482	2,222	2,896	3,939	4,231	4,772
Percent		12.1%	18.1%	23.6%	32.1%	34.5%	38.9%
African-American and Other	1,577	467	550	607	725	747	775
Percent		29.6%	34.9%	38.5%	46.0%	47.4%	49.1%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 8.6% of households did not have a car; 7.3% of Whites and 23.9% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 9.9% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 24.3% of households had no phone.

Income: The mean income of families with children in 1989 was $35,975; in 1979, it had been $32,305, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 1.6%.

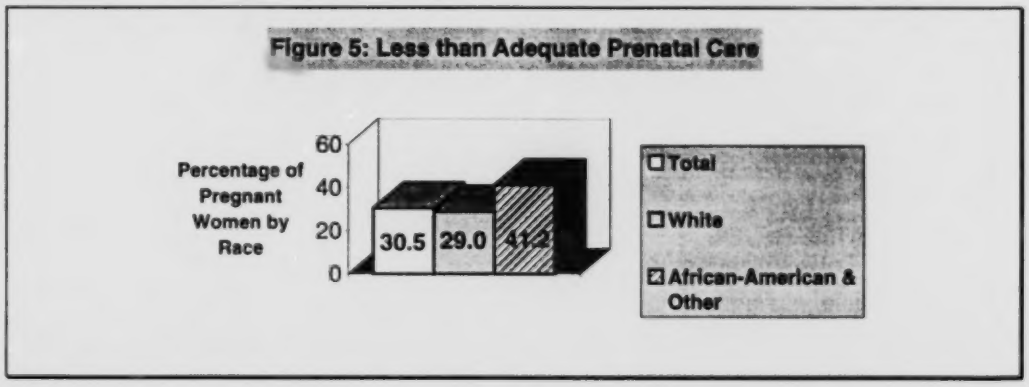
The mean income of single-parent families with children was $17,250 in 1989, as compared with $40,579 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 350 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 32.9% had child support court orders. The average monthly payment of child support was $164.87, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 138 parents in non-AFDC families were obligated to pay a monthly average of $227.88. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 130 or 18.7% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 212 or 30.5% of pregnant women received less than adequate prenatal care: 177 or 29.0% of Whites and 35 or 41.2% of African-Americans and Others. In that same year, 5 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 57 or 8.2% of all babies in the county were born with low birthweight. Over 16.5% of African-American babies and 7.0% of White babies were born with low birthweight. During 1992-94, approximately 24 or 1.1% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 63.3%. For Whites, the rate decreased by 61.6%, while for African-Americans and Others, the rate decreased by 70.4%. Over the three-year period 1992-94, 9 White and 3 African-American and Other infants died before age one. By comparison, 22 White and 8 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 7 White and 1 African-American and Other children ages 1-14 died in the county. During 1982-84, 9 White and 2 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 53.4% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 17.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 580 to 870 youth ages 13-19 in the county were infected with a STD. In the county, there were 0 reported cases of children under age 15 and 13 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 18.8% first smoked by age 11, 37.6% by age 13, and 48.0% by age 15. In a typical month, 17.8% of 7th and 8th graders and 27.8% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 26.0% of White 7th to 12th graders used cigarettes, in comparison with 5.5% African-Americans. A smaller but significant group of high school students (15.1%) used smokeless tobacco monthly; it was used primarily by White males (30.7%) compared with 1.7% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 1,465 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 687 students in grades 1-12 with learning disabilities and 289 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 999 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 2,168 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 13 nurses; 3 are currently available.

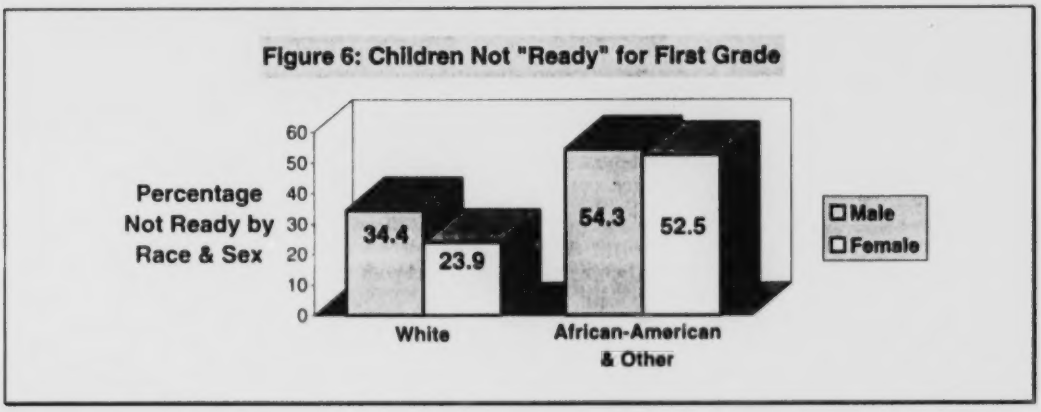
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 33.7% for Whites and 41.2% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

266 children not ready	33.5% children not ready

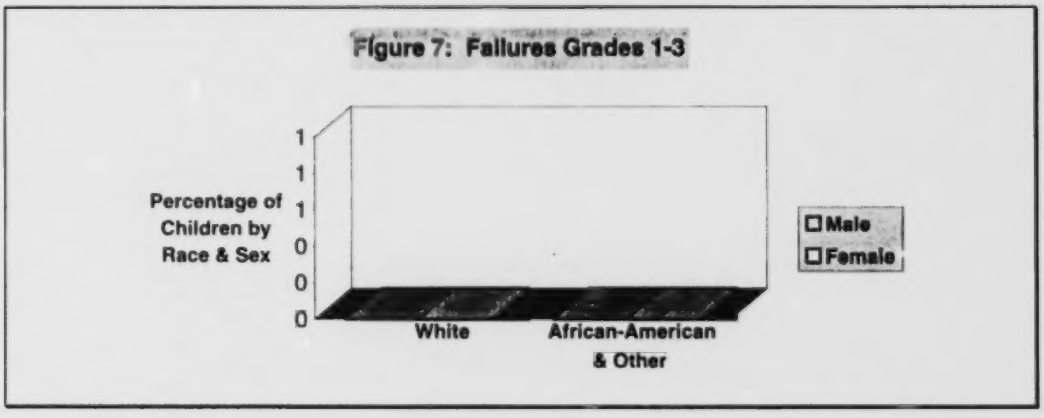


1st Grade Failures in 1995: **

NA	children failing	NA	% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995: **

NA	children failing	NA	% children failing



**** Data is not available for 1995. However, the 1995 Kids Count report found 42 children, 5.8% failed 1st Grade in 1993.**
56 children, 7.9% failed in grades 1-3 in 1993 (8.8% White males, 6.3% White females, 14.3% African American and Other males, and 4.3% African American and Other females).

Overage for Grade 3 in 1996:

143 children overage	20.2% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 279 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 19.0% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 33.5% assessed not ready for the 1st grade, 20.2% overage in grade 3, and 19.0% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

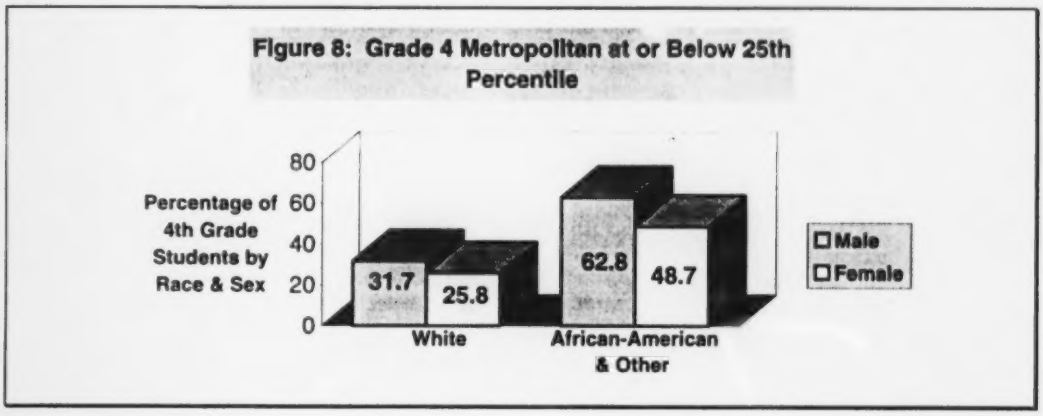
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 289 speech and language impaired, 687 learning disabled, 157 emotionally disabled, 184 mentally impaired, and 80 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 15.6% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

221 children at or below 25th percentile	32.2% children at or below 25th percentile



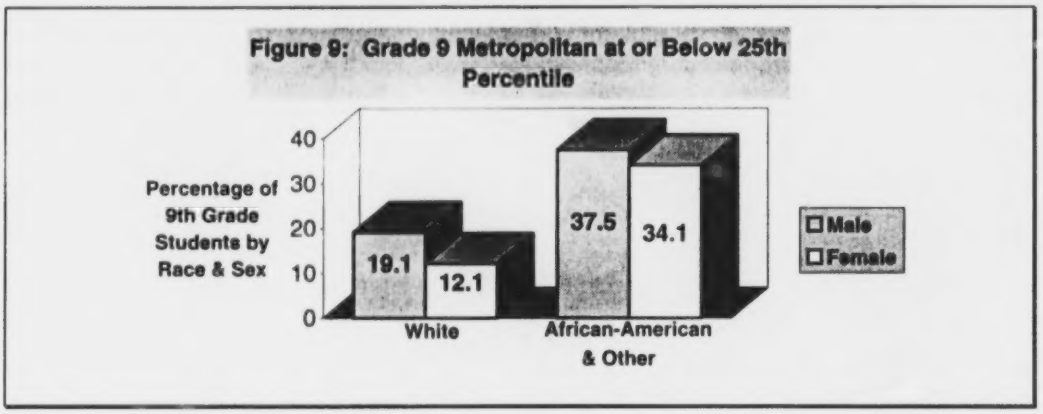
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	218	28.4	169	22.1
White Males	76	22.1	79	23.1
White Females	92	27.5	53	15.9
African-American & Other Males	29	58.0	23	46.0
African-American & Other Females	21	53.8	14	35.9

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

133 students at or below 25th percentile

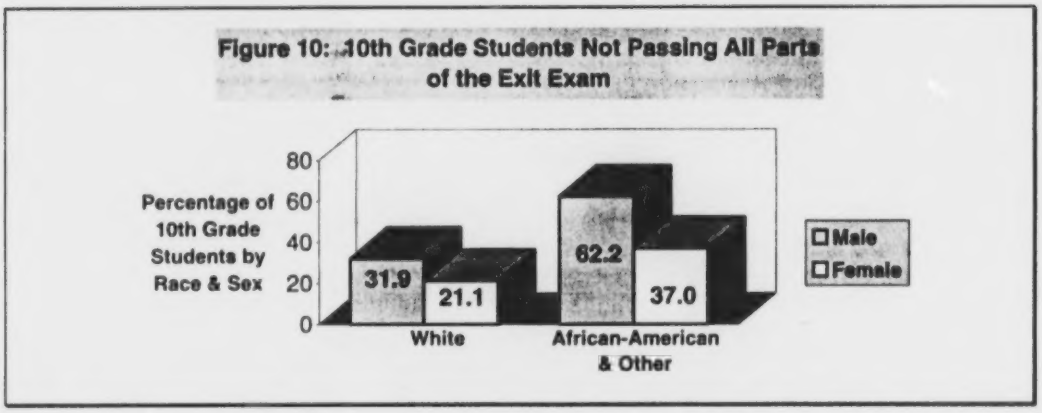
18.2% students at or below 25th percentile



Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

202 students not passing all parts

29.1% students not passing all parts

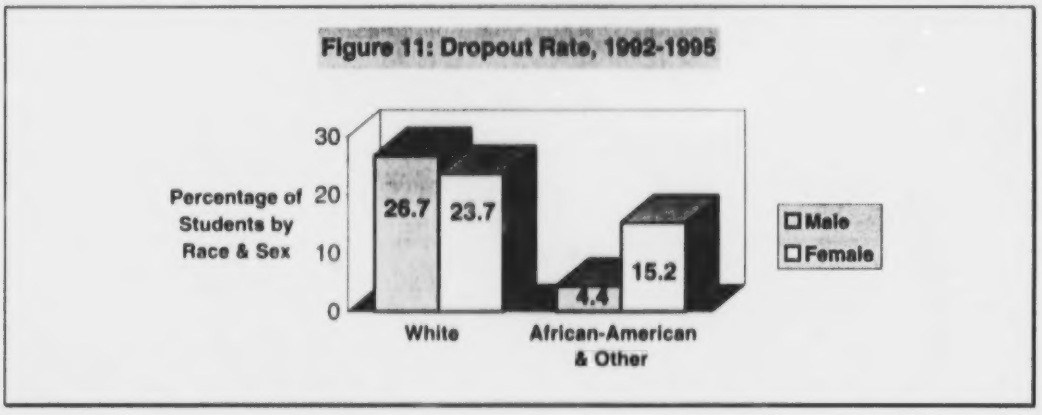


Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 52.7% to 23.5% in math and from 36.6% to 17.3% in reading. During the 1990s the trend altered, with 28.4% not meeting 8th grade math standards in 1996 and 22.1% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 25.9% in 1983 on the CTBS, 30.4% in 1990 on the Stanford, and 30.5% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 25.9% in 1990 and 17.8% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

731 students drop out

23.4% students drop out



Dropouts: A distressing number of students drop out and fail to graduate. An average 30.0% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 28.1% during 1985-89, and 25.5% during 1990-94. During the 1995-96 period, 95.6% of all who did graduate received the State High School Diploma, while 1.8% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 2.6% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 18 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 114 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 23.3% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 18.2% to 32.2%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 378 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 11.5% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

5.8%	White Males	8.6%	African-American & Other Males
17.0%	White Females	19.9%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 57 girls between the ages of 14 and 17 became pregnant in 1993 and 60 in 1994. In 1994, this represented 3.8% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 3.6% for Whites and 5.5% for African-Americans and others. Of all pregnancies to 14-17 year olds, 80.0% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 11.2%.

Alcohol Use: In 1992-93, 17.0% of 7th and 8th graders and 39.8% of high schoolers said they had used alcohol in the past month. Of White males, 33.8% had used it in the past month, compared with 25.6% of African-American males; likewise, 29.9% of White females said they had used alcohol, compared with 16.3% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 18.4% had used alcohol by age 11 or younger, 40.7% by age 13, and 63.0% by age 15.

During the previous year, 29.0% of 7th and 8th graders and 44.1% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 37.6% said they had driven after drinking, and 13.8% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 52.6% of eighth graders and 91.7% of seniors felt that beer was easy to get; 42.9% of eighth graders and 49.3% of seniors felt there was not a great risk in using it regularly.

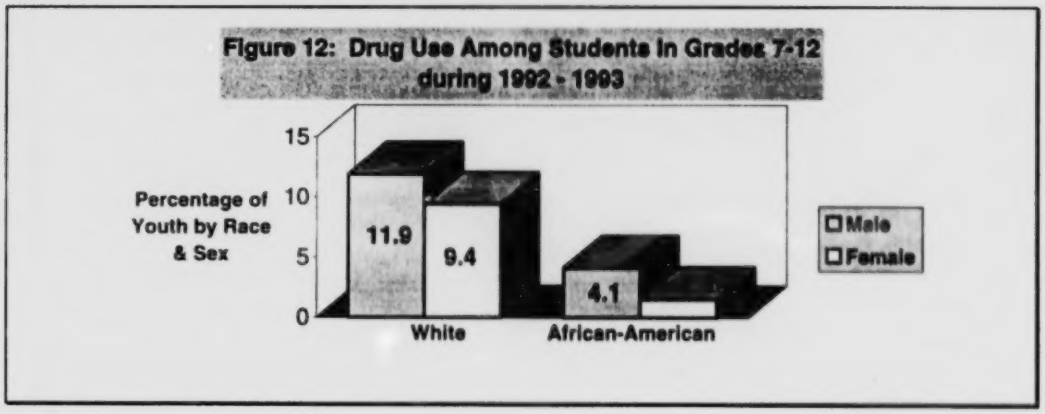
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 33.1% of all high school students in 1992-93 responded 3 or more drinks at a time; 20.8% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 5.0% of 7th and 8th graders and 13.0% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (11.9%) and White females (9.4%); use among African-American males was 4.1%; African-American females, 1.5%. Some young people first used drugs at an early age: among students 15 and older, 3.8% experienced their first use by age 11 or sooner; 10.2% had used a drug by age 13, and 18.8% by age 15.

Of seniors who had initiated use of marijuana, 10.1% had started use at home, 43.6% at a friend's home, and 46.3% elsewhere. During the past year, 3.5% of all high school students said that they used marijuana at home, 8.6% at a friend's house, and 5.8% in a car. In the past year, 7.6% of all high school students who drive and 14.3% of seniors who drive said that they had driven after using drugs . Furthermore, 11.7% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 18.6% of 8th graders who had an opinion said it is easy to get marijuana and 11.5% said it is easy to get cocaine or crack; 80.1% of seniors who had an opinion said it is easy to get marijuana and 52.6% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 21.1% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 167 individual juvenile offenders in the county were referred to the Solicitor; of these, 6.0% were age 12 or younger, 27.5% were 13 or 14, and 66.5% were 15 or older.

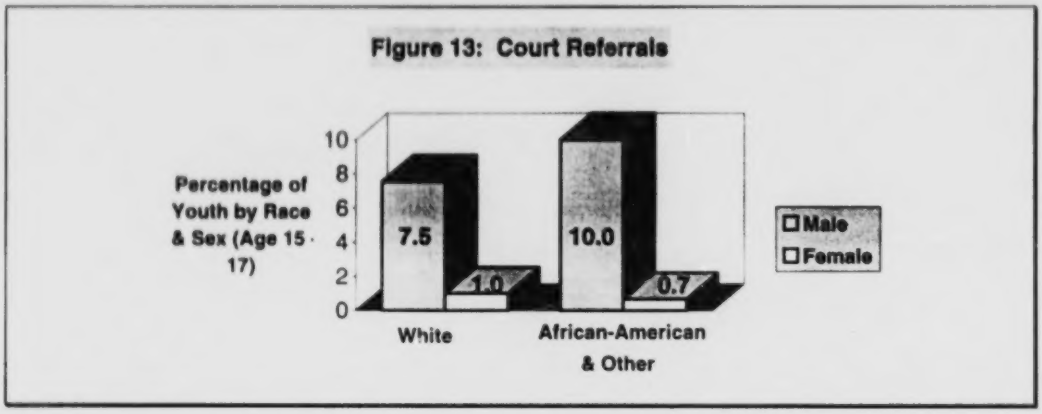
Of the referrals to the family court, 7.2% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 20 juvenile cases constituting 9.0% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 11.9% lived in families with income under $10,000, 45.2% with $10,000-$19,999 and 42.9% with $20,000 or more. Furthermore, only 31.7% of delinquents lived with both natural parents, while 44.5% lived in a single parent household and 23.8% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 29.3% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 29.3% had at least one prior referral and 15% had been referred to court 3 times or more.

In 1994-95, there were 6 juvenile commitments from the county to State institutions.

During 1994-95, 111 youth ages 15 to 17 were referred to the family courts. In the county, 4.6% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 22 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 10 deaths between 1990 and 1994; homicides killed 3 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 18.7% of children in single-parent families, 14.1% in poverty, 23.4% dropping out of school, 39.8% of high school students using alcohol and 21.1% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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-or-
SC Kids Count
SC Budget and Control Board
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P O Box 12444
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Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

OCONEE

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	48	6.9	7.3	0.95	10	1994
Births to Mothers Not Completing High School	181	26.0	21.8	1.19	28	1994
Births to Single Mothers	105	15.1	30.4	0.50	2	1994
Children in Single-Parent Families	2,377	18.7	25.1	0.75	5	1990
Parents Working	4,796	76.7	74.3	1.03	32	1990
Abuse & Neglect Victims	133	0.9	1.0	0.90	16	1995-96
Separation from Parents	843	6.0	5.1	1.18	29	1990
Economic Status						
Poor Children	1,949	14.1	21.0	0.67	6	1989
Mean Income of Families with Children	$35,975	NA	NA	1.01	12	1989
Health						
Less than Adequate Prenatal Care	212	30.5	32.0	0.95	18	1994
Low Birth Weight	57	8.2	9.2	0.89	10	1994
Not Adequately Immunized	113	17.0	18.0	0.94	30	1995
Cigarette Smokers (High School)	689	27.8	23.1	1.20	41	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	266	33.5	28.1	1.19	36	1994-95
1st Grade Failures	NA	NA	6.8	0.00	NA	1994-95
Failures grades 1-3 (approx. %)	NA	NA	11.3	0.00	NA	1994-95
Overage for Grade 3	143	20.2	16.2	1.25	34	1995-96
Special Education (ages 8 and 9)	279	19.0	15.3	1.24	38	1995-96
School Achievement						
Special Education Grades 1 - 12	1,397	15.6	13.0	1.20	37	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	221	32.2	27.9	1.15	24	1995-96
Grade 8 BSAP - Math (Below standards)	218	28.4	34.8	0.82	9	1995-96
Grade 8 BSAP - Reading (Below standards)	169	22.1	28.8	0.77	3	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	133	18.2	29.5	0.62	3	1995-96
Exit Exam (Not passing all parts on 1st attempt)	202	29.1	35.3	0.82	7	1995-96
Dropout Rate	731	23.4	27.3	0.86	8	1992-95
25-34 Year olds with no HS Degree or GED	2,070	23.3	19.1	1.22	22	1990
Adolescent Risk Behavior						
Not in School or Employed	378	11.5	9.6	1.20	30	1990
Pregnancy (Ages 14 - 17)	60	3.8	4.8	0.79	5	1994
Alcohol Use (High School)	987	39.8	37.4	1.06	35	1992-93
Drug Use (High School)	322	13.0	12.8	1.02	32	1992-93
Binge Drinking (5 or more drinks)	516	20.8	16.3	1.28	45	1992-93
Delinquency (ages 15 - 17)	111	4.6	6.4	0.72	6	1994-95

* 1 = "best" 46 = "worst"

OCONEE TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	41	5.2	0.79	1992	45	6.1	0.92	1993	48	6.9	0.95	1994
Births to Mothers Not Completing High School	217	27.3	1.16	1992	195	26.4	1.18	1993	181	26.0	1.19	1994
Births to Single Mothers	122	15.3	0.50	1992	121	16.4	0.54	1993	105	15.1	0.50	1994
Children in Single-Parent Families		9.9	0.68	1970		13.3	0.70	1980	2,377	18.7	0.75	1990
Economic Status												
Poor Children		18.9	0.66	1969		16.6	0.78	1979	1,949	14.1	0.67	1989
Mean Income of Families with Children					32,305	N/A	1.02	1979	35,975	N/A	0.99	1989
Health												
Less than Adequate Prenatal Care	252	31.7	0.80	1992	201	27.2	0.77	1993	212	30.5	0.95	1994
Low Birth Weight	53	6.7	0.74	1992	55	7.5	0.81	1993	57	8.2	0.89	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	213	26.9	1.01	1990-91	182	24.5	0.88	1992-93	266	33.5	1.19	1994-95
1st Grade Failures	93	12.0	1.33	1991-92	42	5.8	0.60	1992-93	NA	NA	NA	1994-95
Failures Grades 1-3 (approx. %)	224	29.6	2.10	1991-92	56	7.9	0.55	1992-93	NA	NA	NA	1994-95
Overage for Grade 3	218	29.1	1.12	1991-92	162	22.5	1.10	1993-94	143	20.2	1.25	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	100	13.7	0.71	1991-92	129	18.9	0.95	1993-94	221	32.2	1.15	1995-96*
Grade 8 BSAP - Math (Below Standards)	171	23.0	0.85	1991-92	226	28.0	0.91	1993-94	218	28.4	0.82	1995-96
Grade 8 BSAP - Reading (Below Standards)	123	16.6	0.68	1991-92	190	23.5	0.82	1993-94	169	22.1	0.77	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	136	17.5	0.80	1991-92	174	20.5	0.84	1993-94	133	18.2	0.62	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	207	31.7	1.02	1991-92	160	24.6	0.75	1993-94	202	29.1	0.82	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	59	3.9	0.83	1992	57	3.7	0.82	1993	60	3.8	0.79	1994
Alcohol Use (High School)	1,104	43.6	1.08	1989-90					987	39.8	1.06	1992-93
Drug Use (High School)	378	14.9	1.11	1989-90					322	13.0	1.02	1992-93
Binge Drinking (5 or more drinks)		21.3	1.37	1989-90					516	20.8	1.28	1992-93

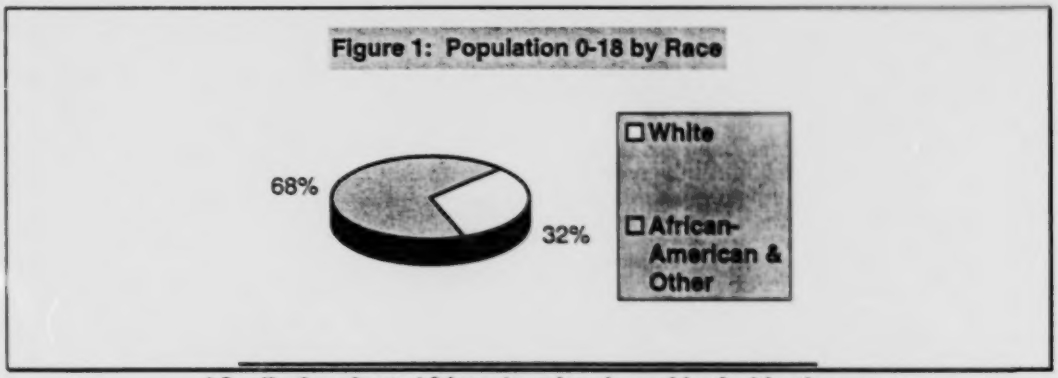
SOUTH CAROLINA kids count

1996 Report ORANGEBURG

DEMOGRAPHICS

In 1994, there were 25,350 children under age 18 in the county. Of these, 8,110 were White and 17,230 were African-American and Other races. There were 26,163 children under age 18 in 1980, 27,484 in 1970, and 31,151 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 28.8% of the population in 1994, down from 45.4% in 1960, 39.4% in 1970 and 31.8% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 36.0% of all households in 1990, as compared with 48.0% of households in 1960, had children below the age of 18.

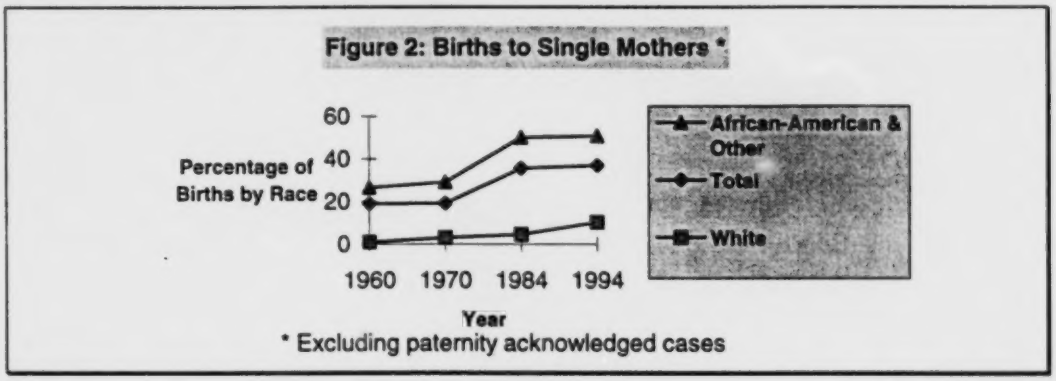
Births to Teen Mothers: In 1994, 114 babies were born to mothers younger than age 18. These babies were 9.2% of all children born in the county; 6.2% of all White babies and 10.8% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 71.1% were born to single mothers.

In 1994, 245 babies were born to mothers younger than age 20. These babies were 19.8% of all children born in the county; 13.1% of all White babies and 23.3% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 64.5% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 280 babies, 22.6% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 50.7% in 1970.

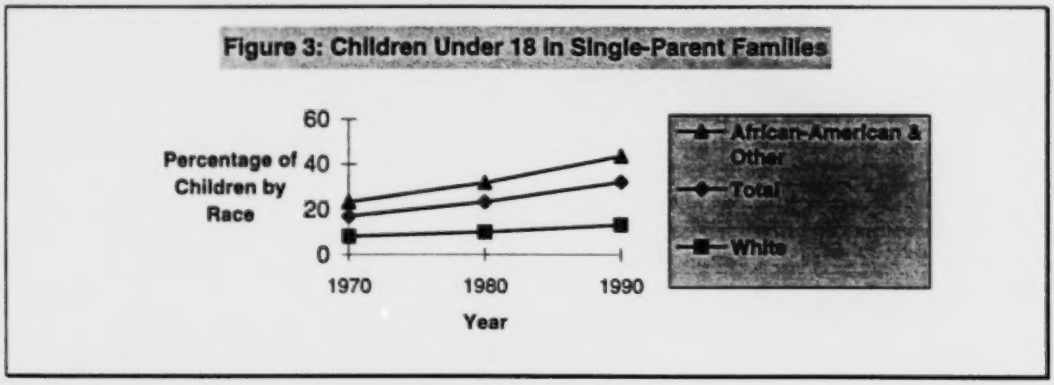
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 457 babies, 36.9% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 35.8% and in 1960 it was 18.9%. In 1994, 10.2% of White children and 50.7% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 158 babies, 12.8% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 615, constituting 49.7% of all babies, 16.9% of White babies, and 66.6% of African-American and Others.



Divorce Rate: In 1994, 731 marriage licenses were issued, while 362 divorce decrees involving 329 children were filed. In 1970 only 83 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 6,281 children lived with only one parent. This was 32.1% of all children, up from 23.3% in 1980 and 17.0% in 1970. In 1990, 13.3% of White children and 43.6% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 68.8% of mothers with children under 6 and 77.8% with children 6 - 17 were in the labor force. This has increased substantially from 44.5% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 962 children investigated as alleged child abuse and neglect victims: 21.4% for physical abuse, 12.7% for sexual abuse, 76.2% for neglect, and 42.5% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 294 children were victims of abuse and neglect: of these 45.2% were male and 54.8% were female; 28.9% were White, and 71.1% were African-American and Other. By age, 41.2% were 0 - 5, 35.7% were 6 - 12, and 23.1% were 13 - 17. They constituted 1.2% of all children age 18 or younger; 1.1% of all Whites and 1.2% of all African-Americans and Others. In the verified cases, 22.1% of abused and neglected children lived in two parent families, 46.3% in single parent families, 8.8% with extended families, and 22.8% in other circumstances.

Family Violence: In 1994, 791 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 28.0% of all assaults, which include both simple and aggravated assaults. Overall, 53.7% of all domestic assaults involve spouse abuse (constituting 15.0% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 6.7% of all children did not live with their natural parents; of these, 1,197 or 5.0% of children lived with relatives, 374 or 1.6% lived with non-relatives, and 34 were in institutional facilities.

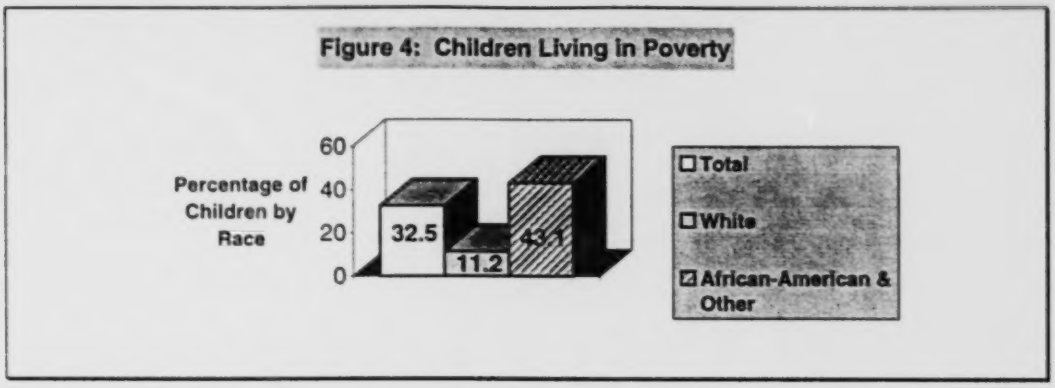
Out of Home Placements: As of September 30, 1996, 128 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 14.8% 0-2, 15.6% 3-5, 18.8% 6-10, 13.3% 11-13, and 37.5% 14 and above. The foster care population is comprised of 50.0% males and 50.0% females. Regarding their future, 14.1% were under a plan for placement in adoptive homes, 50.8% for return to a parent or guardian, 4.7% for placement with a relative, 16.4% for independent living, 14.1% for permanent foster care, and 0.0% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.47 adults for every person below age 18. This was up substantially from 1960, when there were only 1.2 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 7,653 children and youth under the age of 18 lived in families with incomes below poverty. Over 32.5% of all children and youth lived below poverty: 11.2% of Whites and 43.1% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 32.5% in 1989, it was 34.3% in 1979 and 46.8% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 33.5% of children 0 - 5 and 32.0% of children 6 - 17 lived in poverty; 32.4% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 60.2% of children in single-parent families lived in poverty, but only 16.0% of children in married-couple families were poor. Children in single-parent families made up 68.3% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 9,812 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 2,159 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	23,560	7,653	9,812	11,598	13,367	14,052	14,917
Percent		32.5%	41.6%	49.2%	56.7%	59.6%	63.3%
White	7,838	874	1,295	1,707	2,308	2,499	2,789
Percent		11.2%	16.5%	21.8%	29.4%	31.9%	35.6%
African-American and Other	15,722	6,779	8,517	9,891	11,059	11,553	12,128
Percent		43.1%	54.2%	62.9%	70.3%	73.5%	77.1%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 15.2% of households did not have a car; 6.0% of Whites and 23.5% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 14.9% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 31.3% of households had no phone.

Income: The mean income of families with children in 1989 was $28,470; in 1979, it had been $28,170, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 4.4%.

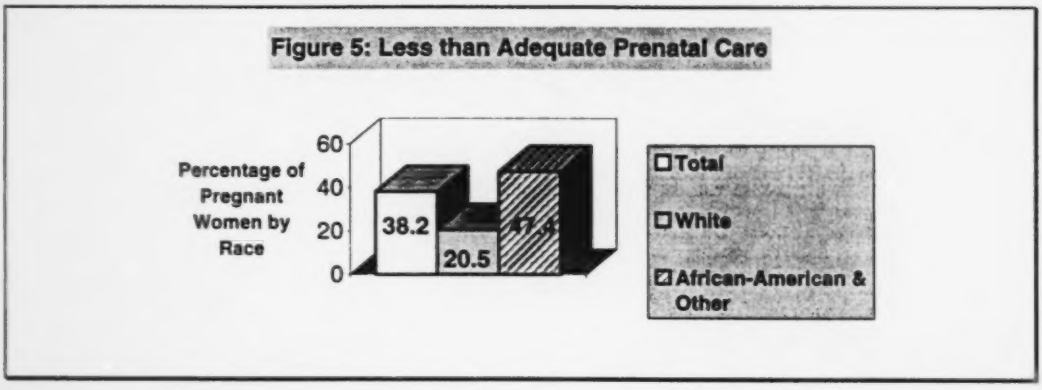
The mean income of single-parent families with children was $12,034 in 1989, as compared with $35,891 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 2,475 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 39.3% had child support court orders. The average monthly payment of child support was $137.80, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 854 parents in non-AFDC families were obligated to pay a monthly average of $164.92. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 397 or 32.1% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 473 or 38.2% of pregnant women received less than adequate prenatal care: 86 or 20.5% of Whites and 387 or 47.4% of African-Americans and Others. In that same year, 22 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 152 or 12.3% of all babies in the county were born with low birthweight. Over 14.8% of African-American babies and 7.4% of White babies were born with low birthweight. During 1992-94, approximately 91 or 2.3% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 13.4%. For Whites, the rate decreased by 22.7%, while for African-Americans and Others, the rate decreased by 10.9%. Over the three-year period 1992-94, 10 White and 38 African-American and Other infants died before age one. By comparison, 14 White and 45 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 10 White and 31 African-American and Other children ages 1-14 died in the county. During 1982-84, 5 White and 30 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 56.8% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 11.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 1,057 to 1,586 youth ages 13-19 in the county were infected with a STD. In the county, there were 8 reported cases of children under age 15 and 128 youth ages 15 - 19 infected with gonorrhea; 1 youth ages 15 - 19 was reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 12.1% first smoked by age 11, 24.9% by age 13, and 34.0% by age 15. In a typical month, 9.7% of 7th and 8th graders and 15.3% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 31.3% of White 7th to 12th graders used cigarettes, in comparison with 6.4% African-Americans. A smaller but significant group of high school students (3.5%) used smokeless tobacco monthly; it was used primarily by White males (24.1%) compared with 0.5% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 2,535 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 781 students in grades 1-12 with learning disabilities and 606 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 1,728 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 3,752 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 21 nurses; 6 are currently available.

Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 28.5% for Whites and 34.1% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

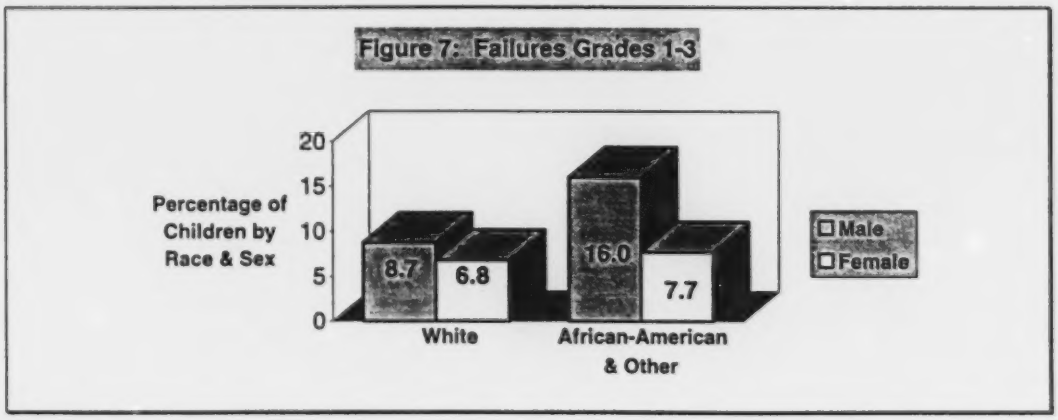
344 children not ready	25.4% children not ready

1st Grade Failures in 1995:

85 children failing	6.5% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

141 children failing	10.9% children failing



Overage for Grade 3 in 1996:

194 children overage	16.9% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 424 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 17.3% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 25.4% assessed not ready for the 1st grade, 16.9% overage in grade 3, and 17.3% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

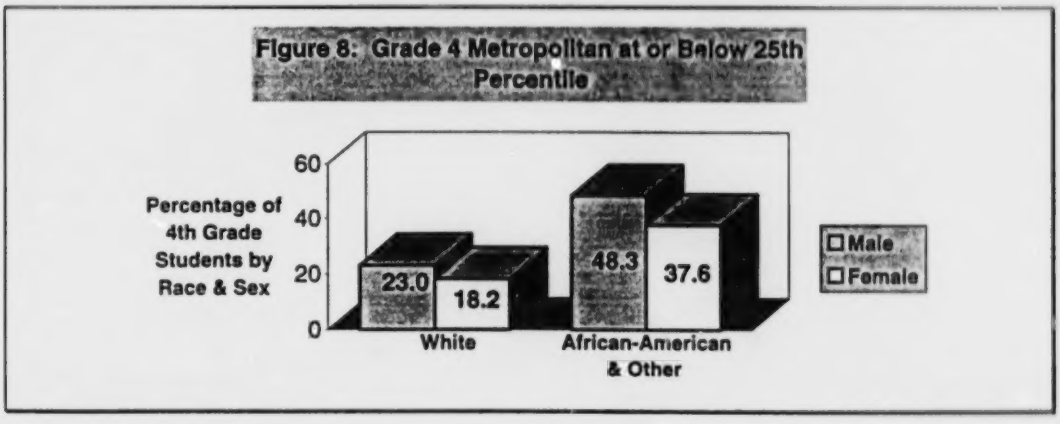
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 606 speech and language impaired, 781 learning disabled, 69 emotionally disabled, 710 mentally impaired, and 69 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 15.1% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996
(i.e. below 75% of students nationwide)

411 children at or below 25th percentile	36.9% children at or below 25th percentile



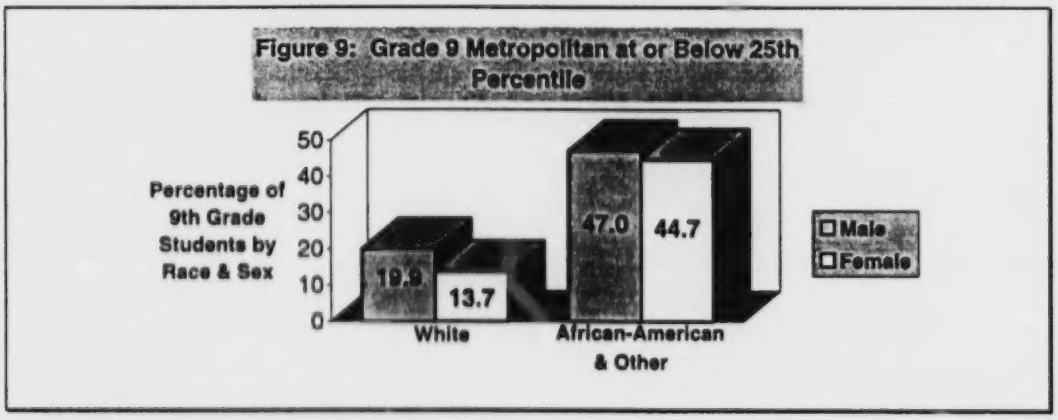
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	639	49.3	522	40.3
White Males	46	30.7	37	24.7
White Females	54	32.3	36	21.4
African-American & Other Males	282	60.9	249	53.9
African-American & Other Females	254	49.7	197	38.6

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

530 students at or below 25th percentile

39.7% students at or below 25th percentile

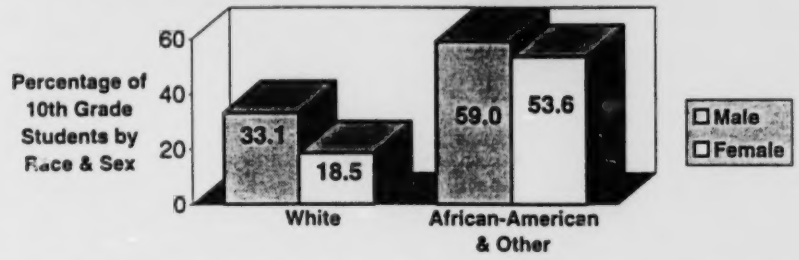


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

524 students not passing all parts

48.7% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



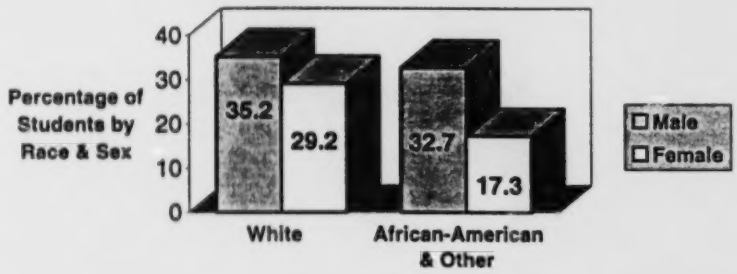
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 80.4% to 29.2% in math and from 68.0% to 23.6% in reading. During the 1990s the trend altered, with 49.3% not meeting 8th grade math standards in 1996 and 40.3% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 41.9% in 1983 on the CTBS, 41.9% in 1990 on the Stanford, and 40.5% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 40.1% in 1990 and 38.5% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

1,355 students drop out

27.2% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 28.8% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 28.2% during 1985-89, and 28.1% during 1990-94. During the 1995-96 period, 92.1% of all who did graduate received the State High School Diploma, while 3.3% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 4.6% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 59 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 79 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 21.3% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 27.2% to 49.3%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 590 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 8.9% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

6.5%	White Males	8.9%	African-American & Other Males
10.7%	White Females	9.2%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 146 girls between the ages of 14 and 17 became pregnant in 1993 and 153 in 1994. In 1994, this represented 5.0% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 4.2% for Whites and 5.3% for African-Americans and others. Of all pregnancies to 14-17 year olds, 73.2% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 9.3%.

Alcohol Use: In 1992-93, 20.9% of 7th and 8th graders and 32.9% of high schoolers said they had used alcohol in the past month. Of White males, 36.5% had used it in the past month, compared with 30.2% of African-American males; likewise, 33.4% of White females said they had used alcohol, compared with 21.3% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 16.3% had used alcohol by age 11 or younger, 32.6% by age 13, and 50.8% by age 15.

During the previous year, 35.0% of 7th and 8th graders and 43.1% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 24.1% said they had driven after drinking, and 13.8% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 52.5% of eighth graders and 81.9% of seniors felt that beer was easy to get; 54.4% of eighth graders and 46.7% of seniors felt there was not a great risk in using it regularly.

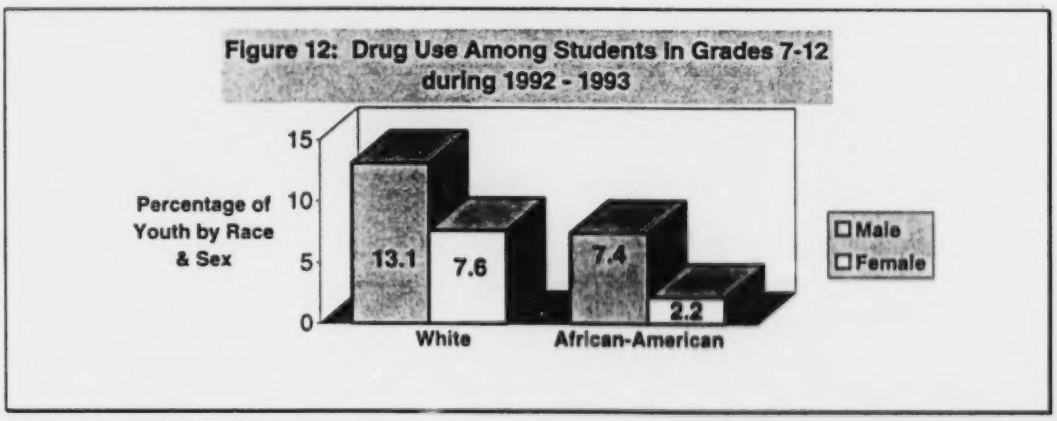
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 20.4% of all high school students in 1992-93 responded 3 or more drinks at a time; 10.8% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 3.4% of 7th and 8th graders and 8.0% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (13.1%) and White females (7.6%); use among African-American males was 7.4%; African-American females, 2.2%. Some young people first used drugs at an early age: among students 15 and older, 2.5% experienced their first use by age 11 or sooner; 5.5% had used a drug by age 13, and 10.3% by age 15.

Of seniors who had initiated use of marijuana, 4.2% had started use at home, 47.0% at a friend's home, and 48.8% elsewhere. During the past year, 1.7% of all high school students said that they used marijuana at home, 4.6% at a friend's house, and 3.5% in a car. In the past year, 4.0% of all high school students who drive and 5.6% of seniors who drive said that they had driven after using drugs . Furthermore, 5.0% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 23.7% of 8th graders who had an opinion said it is easy to get marijuana and 22.9% said it is easy to get cocaine or crack; 72.3% of seniors who had an opinion said it is easy to get marijuana and 65.2% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 13.0% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 657 individual juvenile offenders in the county were referred to the Solicitor; of these, 18.1% were age 12 or younger, 32.4% were 13 or 14, and 49.5% were 15 or older.

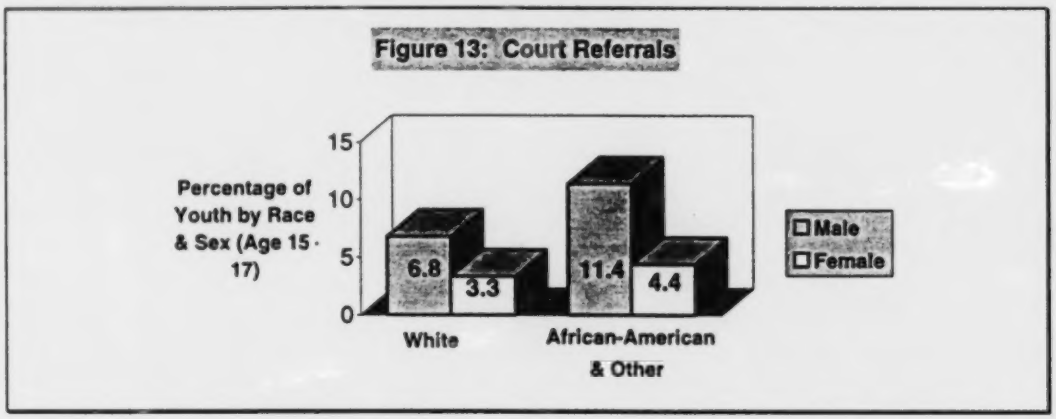
Of the referrals to the family court, 10.9% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 299 juvenile cases constituting 31.0% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 49.7% lived in families with income under $10,000, 30.8% with $10,000-$19,999 and 19.5% with $20,000 or more. Furthermore, only 16.5% of delinquents lived with both natural parents, while 57.5% lived in a single parent household and 25.9% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 38.7% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 34.1% had at least one prior referral and 15.5% had been referred to court 3 times or more.

In 1994-95, there were 71 juvenile commitments from the county to State institutions.

During 1994-95, 325 youth ages 15 to 17 were referred to the family courts. In the county, 7.0% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 36 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 7 deaths between 1990 and 1994; homicides killed 10 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 32.1% of children in single-parent families, 32.5% in poverty, 27.2% dropping out of school, 32.9% of high school students using alcohol and 13.0% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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-or-
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Office of the Executive Director
P O Box 12444
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Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

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SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

ORANGEBURG

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	114	9.2	7.3	1.26	24	1994
Births to Mothers Not Completing High School	280	22.6	21.8	1.04	14	1994
Births to Single Mothers	457	36.9	30.4	1.21	23	1994
Children in Single-Parent Families	6,281	32.1	25.1	1.28	39	1990
Parents Working	6,615	75.2	74.3	1.01	24	1990
Abuse & Neglect Victims	294	1.2	1.0	1.20	31	1995-96
Separation from Parents	1,605	6.7	5.1	1.31	35	1990
Economic Status						
Poor Children	7,653	32.5	21.0	1.55	36	1989
Mean Income of Families with Children	$28,470	NA	NA	0.80	36	1989
Health						
Less than Adequate Prenatal Care	473	38.2	32.0	1.19	34	1994
Low Birth Weight	152	12.3	9.2	1.34	43	1994
Not Adequately Immunized	236	11.0	18.0	0.61	18	1995
Cigarette Smokers (High School)	525	15.3	23.1	0.66	11	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	344	25.4	28.1	0.90	14	1994-95
1st Grade Failures	85	6.5	6.8	0.96	22	1994-95
Failures grades 1-3 (approx. %)	141	10.9	11.3	0.96	18	1994-95
Overage for Grade 3	194	16.9	16.2	1.04	24	1995-96
Special Education (ages 8 and 9)	424	17.3	15.3	1.13	34	1995-96
School Achievement						
Special Education Grades 1 - 12	2,235	15.1	13.0	1.16	35	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	411	36.9	27.9	1.32	34	1995-96
Grade 8 BSAP - Math (Below standards)	639	49.3	34.8	1.42	41	1995-96
Grade 8 BSAP - Reading (Below standards)	522	40.3	28.8	1.40	37	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	530	39.7	29.5	1.35	35	1995-96
Exit Exam (Not passing all parts on 1st attempt)	524	48.7	35.3	1.38	37	1995-96
Dropout Rate	1,355	27.2	27.3	1.00	22	1992-95
25-34 Year olds with no HS Degree or GED	2,681	21.3	19.1	1.12	13	1990
Adolescent Risk Behavior						
Not in School or Employed	590	8.9	9.6	0.93	11	1990
Pregnancy (Ages 14 - 17)	153	5.0	4.8	1.04	17	1994
Alcohol Use (High School)	1,129	32.9	37.4	0.88	11	1992-93
Drug Use (High School)	275	8.0	12.8	0.63	18	1992-93
Binge Drinking (5 or more drinks)	371	10.8	16.3	0.66	4	1992-93
Delinquency (ages 15 - 17)	325	7.0	6.4	1.09	29	1994-95

* 1 = "best" 46 = "worst"

ORANGEBURG TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	102	7.1	1.08	1992	106	8.1	1.23	1993	114	9.2	1.26	1994
Births to Mothers Not Completing High School	305	21.3	0.90	1992	283	21.6	0.96	1993	280	22.6	1.04	1994
Births to Single Mothers	560	39.2	1.29	1992	520	39.6	1.31	1993	457	36.9	1.21	1994
Children in Single-Parent Families		17.0	1.17	1970		23.3	1.23	1980	6,281	32.1	1.28	1990
Economic Status												
Poor Children		46.8	1.63	1969		34.3	1.62	1979	7,653	32.5	1.55	1989
Mean Income of Families with Children					28,170	N/A	1.17	1979	28,470	N/A	1.25	1989
Health												
Less than Adequate Prenatal Care	772	54.0	1.37	1992	592	45.1	1.28	1993	473	38.2	1.19	1994
Low Birth Weight	174	12.2	1.36	1992	143	10.9	1.17	1993	152	12.3	1.34	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	304	20.9	0.79	1990-91	340	25.3	0.91	1992-93	344	25.4	0.90	1994-95
1st Grade Failures	134	9.3	1.03	1991-92	109	8.7	0.90	1992-93	85	6.5	0.96	1994-95
Failures Grades 1-3 (approx. %)	237	17.1	1.21	1991-92	203	16.8	1.17	1992-93	141	10.9	0.96	1994-95
Overage for Grade 3	388	28.1	1.08	1991-92	287	22.8	1.11	1993-94	194	16.9	1.04	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	388	28.5	1.48	1991-92	392	32.7	1.65	1993-94	411	36.9	1.32	1995-96*
Grade 8 BSAP - Math (Below Standards)	310	29.1	1.08	1991-92	485	41.0	1.33	1993-94	639	49.3	1.42	1995-96
Grade 8 BSAP - Reading (Below Standards)	296	27.9	1.14	1991-92	432	36.5	1.27	1993-94	522	40.3	1.40	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	341	26.0	1.19	1991-92	396	30.5	1.26	1993-94	530	39.7	1.35	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	301	34.8	1.12	1991-92	399	44.2	1.35	1993-94	524	48.7	1.38	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	136	4.5	0.96	1992	146	4.8	1.07	1993	153	5.0	1.04	1994
Alcohol Use (High School)	1,320	34.3	0.85	1989-90					1,129	32.9	0.88	1992-93
Drug Use (High School)	308	8.0	0.60	1989-90					275	8.0	0.63	1992-93
Binge Drinking (5 or more drinks)		9.6	0.62	1989-90					371	10.8	0.66	1992-93

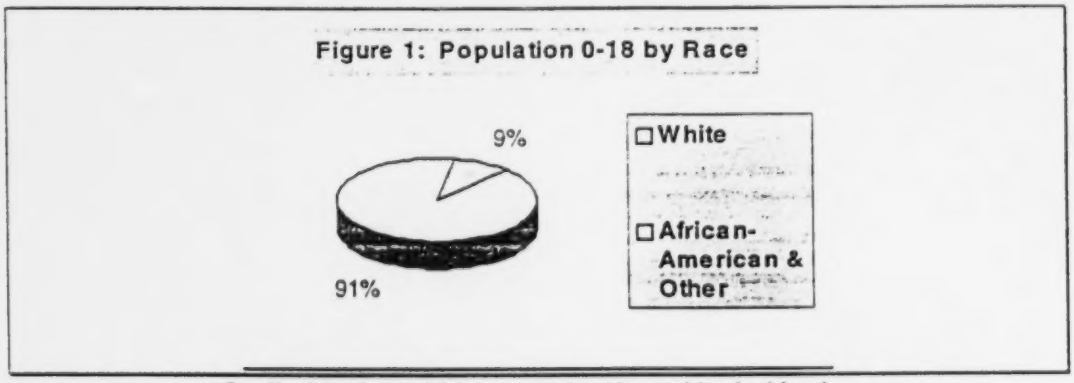
SOUTH CAROLINA kids count

1996 Report PICKENS

DEMOGRAPHICS

In 1994, there were 24,690 children under age 18 in the county. Of these, 22,380 were White and 2,310 were African-American and Other races. There were 20,916 children under age 18 in 1980, 18,626 in 1970, and 17,477 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 24.4% of the population in 1994, down from 38.0% in 1960, 31.6% in 1970 and 26.4% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 33.6% of all households in 1990, as compared with 46.0% of households in 1960, had children below the age of 18.

Births to Teen Mothers: In 1994, 82 babies were born to mothers younger than age 18. These babies were 6.8% of all children born in the county; 6.9% of all White babies and 6.4% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 57.3% were born to single mothers.

In 1994, 213 babies were born to mothers younger than age 20. These babies were 17.8% of all children born in the county; 17.3% of all White babies and 22.0% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 46.0% were born to single mothers.

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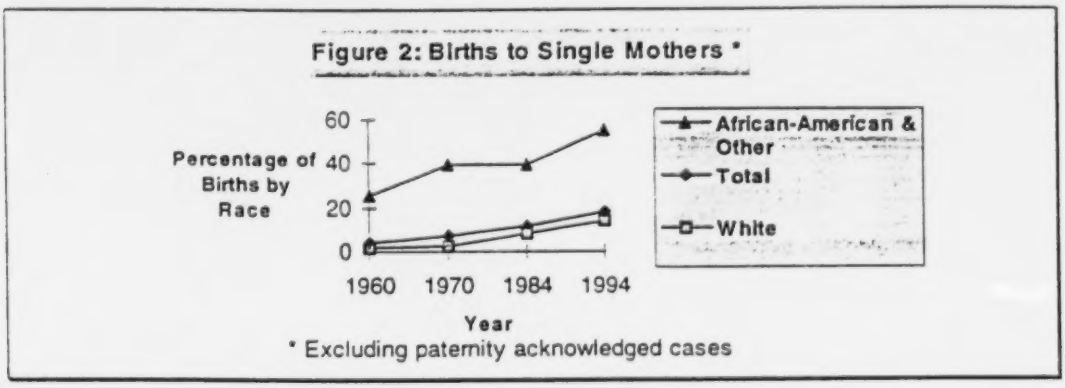
Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 299 babies, 24.9% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 44.0% in 1970.

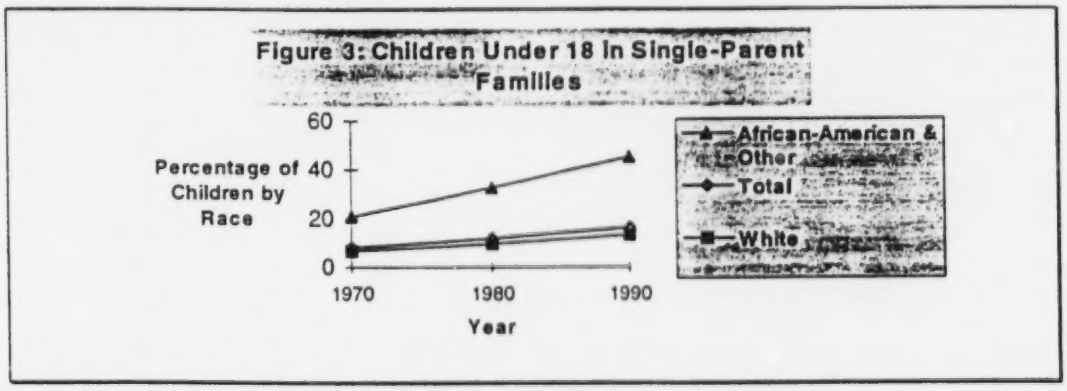
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 215 babies, 17.9% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 11.3% and in 1960 it was 4.3%. In 1994, 14.2% of White children and 55.0% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 46 babies, 3.8% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 261, constituting 21.8% of all babies, 18.2% of White babies, and 57.8% of African-American and Others.



Divorce Rate: In 1994, 1,049 marriage licenses were issued, while 502 divorce decrees involving 415 children were filed. In 1970 only 159 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 3,072 children lived with only one parent. This was 16.2% of all children, up from 12.2% in 1980 and 8.0% in 1970. In 1990, 13.6% of White children and 45.4% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 67.1% of mothers with children under 6 and 79.9% with children 6 - 17 were in the labor force. This has increased substantially from 41.5% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

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Abuse and Neglect: In 1995-96, there were 518 children investigated as alleged child abuse and neglect victims: 32.4% for physical abuse, 14.1% for sexual abuse, 62.5% for neglect, and 9.8% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 135 children were victims of abuse and neglect: of these 47.4% were male and 52.6% were female; 78.5% were White, and 21.5% were African-American and Other. By age, 39.3% were 0 - 5, 38.5% were 6 - 12, and 22.2% were 13 - 17. They constituted 0.5% of all children age 18 or younger; 0.5% of all Whites and 1.2% of all African-Americans and Others. In the verified cases, 40.7% of abused and neglected children lived in two parent families, 45.9% in single parent families, 1.5% with extended families, and 11.9% in other circumstances.

Family Violence: In 1994, 356 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 35.0% of all assaults, which include both simple and aggravated assaults. Overall, 55.9% of all domestic assaults involve spouse abuse (constituting 19.5% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 3.6% of all children did not live with their natural parents; of these, 425 or 2.1% of children lived with relatives, 226 or 1.1% lived with non-relatives, and 96 were in institutional facilities.

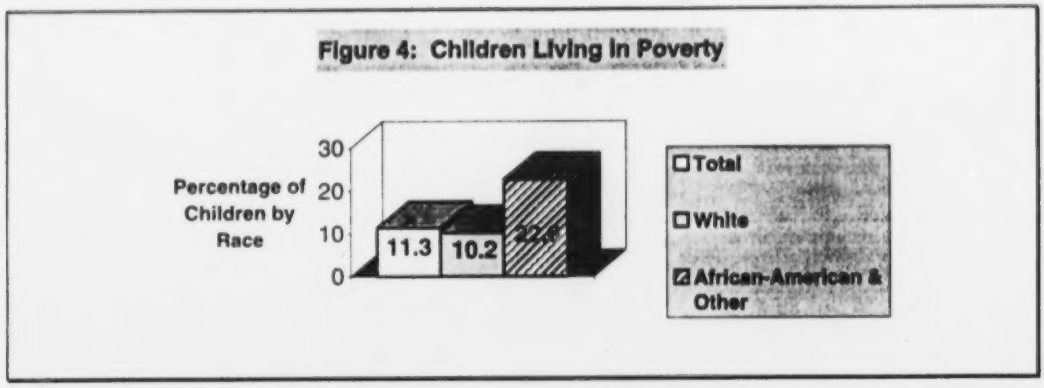
Out of Home Placements: As of September 30, 1996, 60 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 15.0% 0-2, 18.3% 3-5, 31.7% 6-10, 6.7% 11-13, and 28.3% 14 and above. The foster care population is comprised of 45.0% males and 55.0% females. Regarding their future, 25.0% were under a plan for placement in adoptive homes, 50.0% for return to a parent or guardian, 0.0% for placement with a relative, 21.7% for independent living, 3.3% for permanent foster care, and 0.0% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 3.09 adults for every person below age 18. This was up substantially from 1960, when there were only 1.63 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 2,298 children and youth under the age of 18 lived in families with incomes below poverty. Over 11.3% of all children and youth lived below poverty: 10.2% of Whites and 22.6% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 11.3% in 1989, it was 10.5% in 1979 and 14.3% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 12.2% of children 0 - 5 and 10.9% of children 6 - 17 lived in poverty; 15.2% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 37.0% of children in single-parent families lived in poverty, but only 6.0% of children in married-couple families were poor. Children in single-parent families made up 55.3% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 3,441 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 1,143 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	20,309	2,298	3,441	4,306	5,770	6,334	6,998
Percent		11.3%	16.9%	21.2%	28.4%	31.2%	34.5%
White	18,459	1,880	2,826	3,601	4,943	5,472	6,134
Percent		10.2%	15.3%	19.5%	26.8%	29.6%	33.2%
African-American and Other	1,850	418	615	705	827	862	864
Percent		22.6%	33.2%	38.1%	44.7%	46.6%	46.7%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 7.1% of households did not have a car; 6.2% of Whites and 18.6% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 9.1% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 19.5% of households had no phone.

Income: The mean income of families with children in 1989 was $37,034; in 1979, it had been $35,024, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 2.3%.

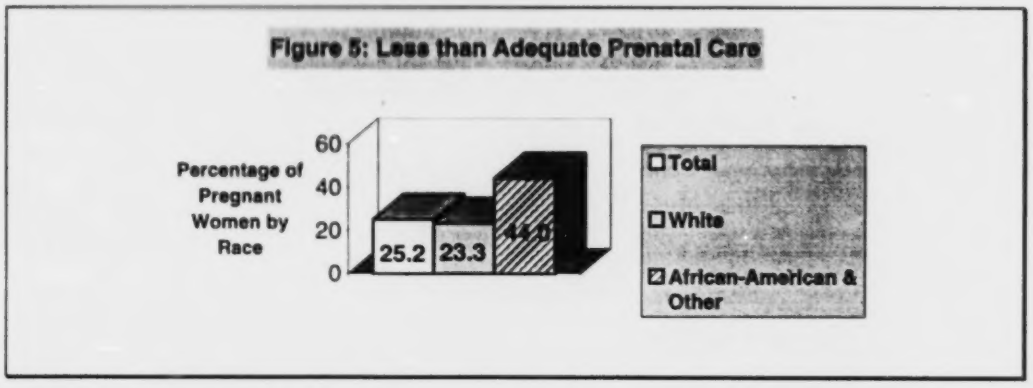
The mean income of single-parent families with children was $18,204 in 1989, as compared with $40,400 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 435 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 33.8% had child support court orders. The average monthly payment of child support was $151.65, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 160 parents in non-AFDC families were obligated to pay a monthly average of $236.35. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 222 or 18.5% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 302 or 25.2% of pregnant women received less than adequate prenatal care: 254 or 23.3% of Whites and 48 or 44.0% of African-Americans and Others. In that same year, 8 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 79 or 6.6% of all babies in the county were born with low birthweight. Over 5.5% of African-American babies and 6.7% of White babies were born with low birthweight. During 1992-94, approximately 44 or 1.2% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 46.4%. For Whites, the rate decreased by 46.6%, while for African-Americans and Others, the rate decreased by 44.0%. Over the three-year period 1992-94, 27 White and 3 African-American and Other infants died before age one. By comparison, 40 White and 4 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 15 White and 0 African-American and Other children ages 1-14 died in the county. During 1982-84, 16 White and 1 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 54.2% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 7.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 1,271 to 1,907 youth ages 13-19 in the county were infected with a STD. In the county, there were 2 reported cases of children under age 15 and 31 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 18.7% first smoked by age 11, 40.4% by age 13, and 54.6% by age 15. In a typical month, 18.1% of 7th and 8th graders and 31.4% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 27.6% of White 7th to 12th graders used cigarettes, in comparison with 6.5% African-Americans. A smaller but significant group of high school students (13.1%) used smokeless tobacco monthly; it was used primarily by White males (26.1%) compared with 2.3% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 2,469 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 834 students in grades 1-12 with learning disabilities and 237 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 1,725 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 3,654 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 20 nurses; 0 are currently available.

Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 24.9% for Whites and 48.6% for African-Americans and Others in 1995.

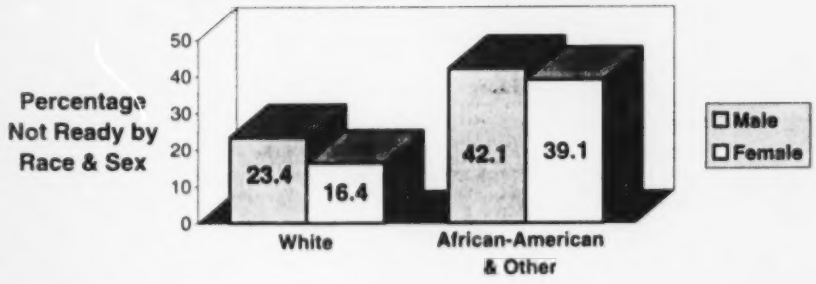
READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

311 children not ready **22.5% children not ready**

Figure 6: Children Not "Ready" for First Grade



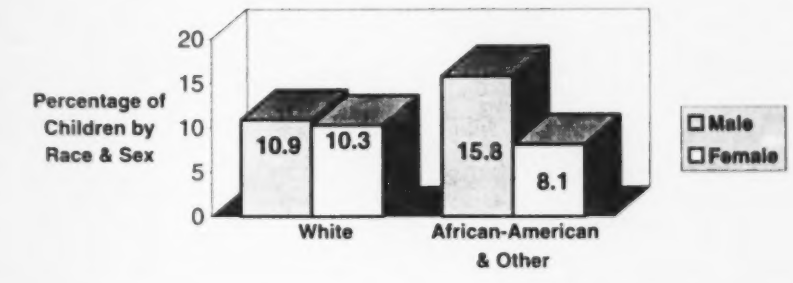
1st Grade Failures in 1995:

85 children failing **6.4% children failing**

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

135 children failing **10.7% children failing**

Figure 7: Failures Grades 1-3



Overage for Grade 3 in 1996:

165 children overage	14.9% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 293 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 12.2% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 22.5% assessed not ready for the 1st grade, 14.9% overage in grade 3, and 12.2% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

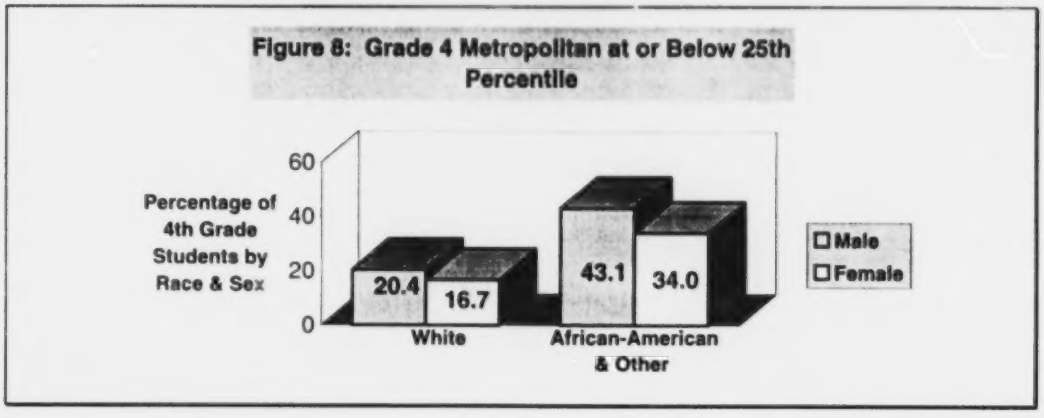
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 237 speech and language impaired, 834 learning disabled, 126 emotionally disabled, 325 mentally impaired, and 93 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 11.7% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

220 children at or below 25th percentile	20.3% children at or below 25th percentile



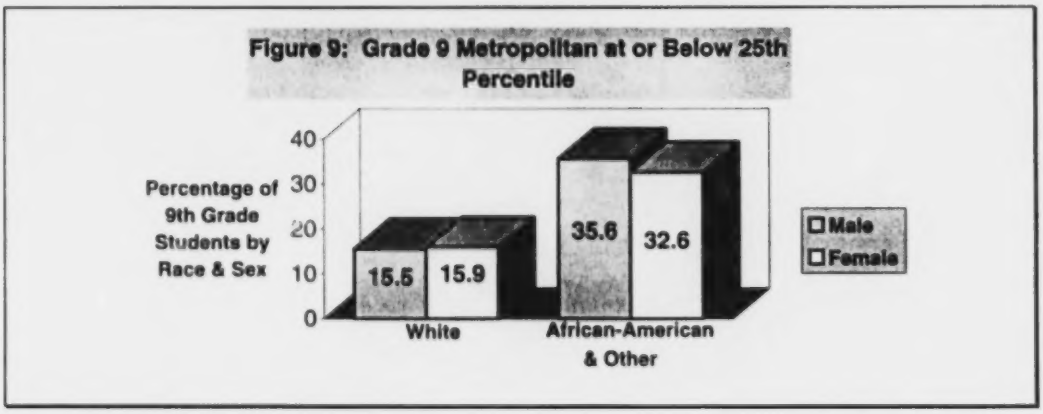
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	369	30.7	281	23.4
White Males	143	27.5	123	23.6
White Females	164	29.1	102	18.1
African-American & Other Males	28	50.9	29	51.8
African-American & Other Females	33	54.1	26	42.6

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

195 students at or below 25th percentile

17.3% students at or below 25th percentile

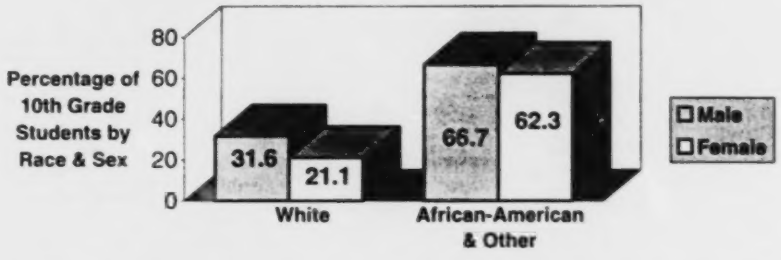


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

309 students not passing all parts

30.7% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



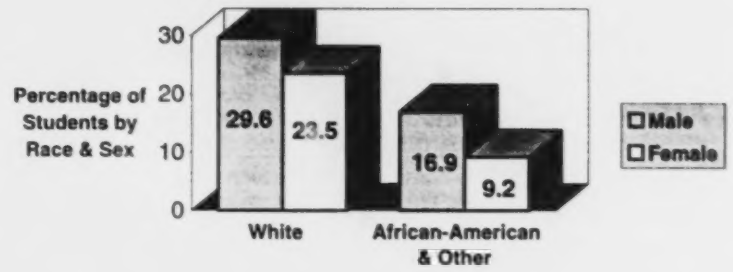
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 46.1% to 23.0% in math and from 32.6% to 18.0% in reading. During the 1990s the trend altered, with 30.7% not meeting 8th grade math standards in 1996 and 23.4% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 23.9% in 1983 on the CTBS, 27.7% in 1990 on the Stanford, and 23.1% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 25.0% in 1990 and 19.7% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

1,165 students drop out

25.4% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 25.7% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 26.0% during 1985-89, and 28.2% during 1990-94. During the 1995-96 period, 92.8% of all who did graduate received the State High School Diploma, while 2.4% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 4.8% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 89 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 131 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 20.4% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 17.3% to 30.7%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 410 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 4.6% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

4.8%	White Males	1.6%	African-American & Other Males
5.2%	White Females	1.1%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 103 girls between the ages of 14 and 17 became pregnant in 1993 and 115 in 1994. In 1994, this represented 3.3% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 3.2% for Whites and 3.6% for African-Americans and others. Of all pregnancies to 14-17 year olds, 70.4% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 3.0%.

Alcohol Use: In 1992-93, 16.1% of 7th and 8th graders and 35.9% of high schoolers said they had used alcohol in the past month. Of White males, 29.3% had used it in the past month, compared with 20.9% of African-American males; likewise, 27.1% of White females said they had used alcohol, compared with 22.1% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 16.8% had used alcohol by age 11 or younger, 38.5% by age 13, and 60.8% by age 15.

During the previous year, 28.7% of 7th and 8th graders and 41.0% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 28.2% said they had driven after drinking, and 8.9% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 50.9% of eighth graders and 89.9% of seniors felt that beer was easy to get; 40.7% of eighth graders and 43.9% of seniors felt there was not a great risk in using it regularly.

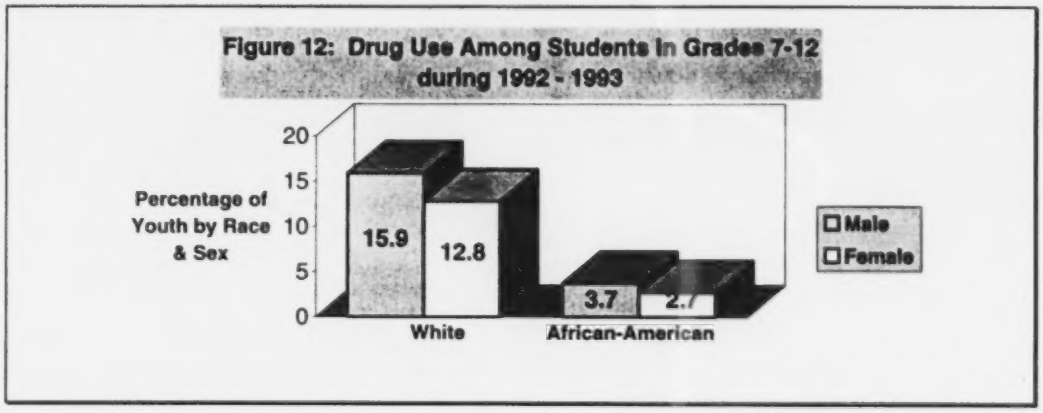
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 29.5% of all high school students in 1992-93 responded 3 or more drinks at a time; 18.8% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 7.2% of 7th and 8th graders and 17.9% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (15.9%) and White females (12.8%); use among African-American males was 3.7%; African-American females, 2.7%. Some young people first used drugs at an early age: among students 15 and older, 5.3% experienced their first use by age 11 or sooner; 14.0% had used a drug by age 13, and 25.4% by age 15.

Of seniors who had initiated use of marijuana, 9.7% had started use at home, 46.2% at a friend's home, and 44.1% elsewhere. During the past year, 5.9% of all high school students said that they used marijuana at home, 12.2% at a friend's house, and 7.9% in a car. In the past year, 7.7% of all high school students who drive and 9.3% of seniors who drive said that they had driven after using drugs . Furthermore, 8.9% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 25.1% of 8th graders who had an opinion said it is easy to get marijuana and 12.8% said it is easy to get cocaine or crack; 78.1% of seniors who had an opinion said it is easy to get marijuana and 47.1% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 29.0% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 302 individual juvenile offenders in the county were referred to the Solicitor; of these, 6.0% were age 12 or younger, 27.2% were 13 or 14, and 66.9% were 15 or older.

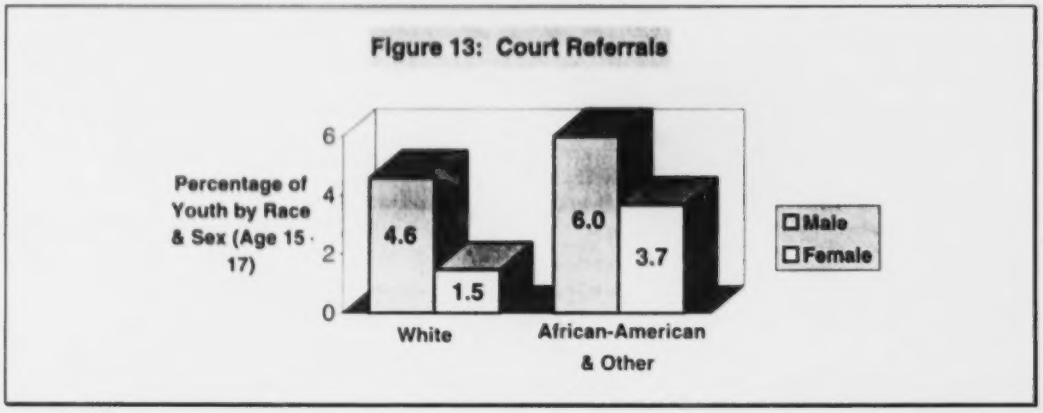
Of the referrals to the family court, 11.1% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 12 juvenile cases constituting 3.2% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 24.4% lived in families with income under $10,000, 29.3% with $10,000-$19,999 and 46.3% with $20,000 or more. Furthermore, only 29.3% of delinquents lived with both natural parents, while 39.8% lived in a single parent household and 31.0% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 28.2% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 27.5% had at least one prior referral and 9.3% had been referred to court 3 times or more.

In 1994-95, there were 15 juvenile commitments from the county to State institutions.

During 1994-95, 200 youth ages 15 to 17 were referred to the family courts. In the county, 3.3% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 36 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 21 deaths between 1990 and 1994; homicides killed 4 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 16.2% of children in single-parent families, 11.3% in poverty, 25.4% dropping out of school, 35.9% of high school students using alcohol and 29.0% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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-or-
SC Kids Count
SC Budget and Control Board
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P O Box 12444
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Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

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SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

PICKENS

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	82	6.8	7.3	0.93	9	1994
Births to Mothers Not Completing High School	299	24.9	21.8	1.14	22	1994
Births to Single Mothers	215	17.9	30.4	0.59	3	1994
Children in Single-Parent Families	3,072	16.2	25.1	0.65	1	1990
Parents Working	6,870	75.9	74.3	1.02	28	1990
Abuse & Neglect Victims	135	0.5	1.0	0.50	5	1995-96
Separation from Parents	747	3.6	5.1	0.71	2	1990
Economic Status						
Poor Children	2,298	11.3	21.0	0.54	2	1989
Mean Income of Families with Children	$37,034	NA	NA	1.04	10	1989
Health						
Less than Adequate Prenatal Care	302	25.2	32.0	0.79	6	1994
Low Birth Weight	79	6.6	9.2	0.72	2	1994
Not Adequately Immunized	85	7.0	18.0	0.39	5	1995
Cigarette Smokers (High School)	1,048	31.4	23.1	1.36	45	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	311	22.5	28.1	0.80	7	1994-95
1st Grade Failures	85	6.4	6.8	0.94	20	1994-95
Failures grades 1-3 (approx. %)	135	10.7	11.3	0.95	17	1994-95
Overage for Grade 3	165	14.9	16.2	0.92	17	1995-96
Special Education (ages 8 and 9)	293	12.2	15.3	0.80	8	1995-96
School Achievement						
Special Education Grades 1 - 12	1,615	11.7	13.0	0.90	10	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	220	20.3	27.9	0.73	5	1995-96
Grade 8 BSAP - Math (Below standards)	369	30.7	34.8	0.88	12	1995-96
Grade 8 BSAP - Reading (Below standards)	281	23.4	28.8	0.81	8	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	195	17.3	29.5	0.59	2	1995-96
Exit Exam (Not passing all parts on 1st attempt)	309	30.7	35.3	0.87	10	1995-96
Dropout Rate	1,165	25.4	27.3	0.93	18	1992-95
25-34 Year olds with no HS Degree or GED	2,859	20.4	19.1	1.07	11	1990
Adolescent Risk Behavior						
Not in School or Employed	410	4.6	9.6	0.48	1	1990
Pregnancy (Ages 14 - 17)	115	3.3	4.8	0.69	2	1994
Alcohol Use (High School)	1,198	35.9	37.4	0.96	23	1992-93
Drug Use (High School)	598	17.9	12.8	1.40	46	1992-93
Binge Drinking (5 or more drinks)	628	18.8	16.3	1.15	38	1992-93
Delinquency (ages 15 - 17)	200	3.3	6.4	0.52	1	1994-95

* 1 = "best" 46 = "worst"

PICKENS TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	66	5.4	0.82	1992	82	6.7	1.02	1993	82	6.8	0.93	1994
Births to Mothers Not Completing High School	320	26.4	1.12	1992	317	25.9	1.16	1993	299	24.9	1.14	1994
Births to Single Mothers	190	15.7	0.52	1992	207	16.9	0.56	1993	215	17.9	0.59	1994
Children in Single-Parent Families		8.0	0.55	1970		12.2	0.65	1980	3,072	16.2	0.65	1990
Economic Status												
Poor Children		14.3	0.50	1969		10.5	0.50	1979	2,298	11.3	0.54	1989
Mean Income of Families with Children					35,024	N/A	0.94	1979	37,034	N/A	0.96	1989
Health												
Less than Adequate Prenatal Care	273	22.5	0.57	1992	242	19.8	0.56	1993	302	25.2	0.79	1994
Low Birth Weight	80	6.6	0.73	1992	84	6.9	0.74	1993	79	6.6	0.72	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	253	21.1	0.79	1990-91	276	23.1	0.83	1992-93	311	22.5	0.80	1994-95
1st Grade Failures	111	9.4	1.04	1991-92	90	8.5	0.88	1992-93	85	6.4	0.94	1994-95
Failures Grades 1-3 (approx. %)	143	12.4	0.88	1991-92	106	10.1	0.71	1992-93	135	10.7	0.95	1994-95
Overage for Grade 3	260	25.6	0.98	1991-92	211	19.0	0.93	1993-94	165	14.9	0.92	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	173	15.2	0.79	1991-92	194	17.7	0.89	1993-94	220	20.3	0.73	1995-96*
Grade 8 BSAP - Math (Below Standards)	308	26.1	0.97	1991-92	279	29.4	0.95	1993-94	369	30.7	0.88	1995-96
Grade 8 BSAP - Reading (Below Standards)	243	20.6	0.84	1991-92	261	27.5	0.95	1993-94	281	23.4	0.81	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	156	15.0	0.68	1991-92	188	20.2	0.83	1993-94	195	17.3	0.59	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	271	28.1	0.90	1991-92	298	29.6	0.91	1993-94	309	30.7	0.87	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	89	2.6	0.55	1992	103	3.0	0.67	1993	115	3.3	0.69	1994
Alcohol Use (High School)	1,493	41.9	1.04	1989-90					1,198	35.9	0.96	1992-93
Drug Use (High School)	593	16.6	1.24	1989-90					598	17.9	1.40	1992-93
Binge Drinking (5 or more drinks)		20.2	1.29	1989-90					628	18.8	1.15	1992-93

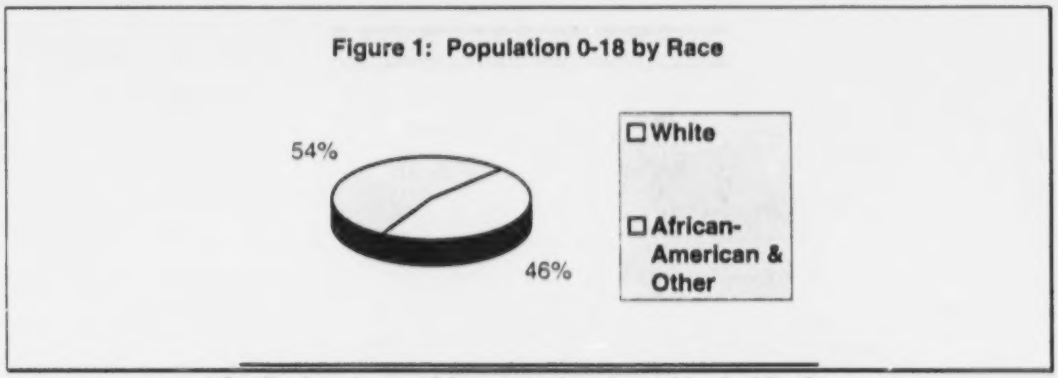
SOUTH CAROLINA kids count

1996 Report RICHLAND

DEMOGRAPHICS

In 1994, there were 74,700 children under age 18 in the county. Of these, 34,300 were White and 40,400 were African-American and Other races. There were 71,113 children under age 18 in 1980, 74,854 in 1970, and 71,958 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 25.0% of the population in 1994, down from 36.0% in 1960, 32.0% in 1970 and 26.4% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 32.8% of all households in 1990, as compared with 48.0% of households in 1960, had children below the age of 18.

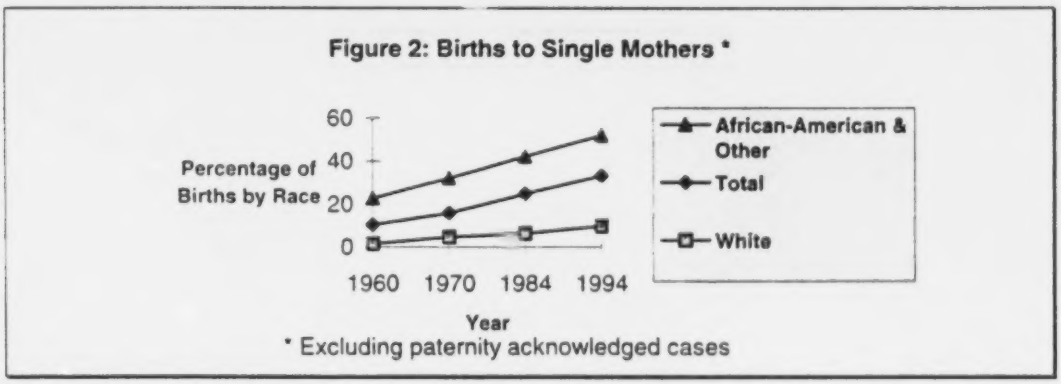
Births to Teen Mothers: In 1994, 257 babies were born to mothers younger than age 18. These babies were 6.0% of all children born in the county; 2.5% of all White babies and 8.9% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 89.1% were born to single mothers.

In 1994, 592 babies were born to mothers younger than age 20. These babies were 13.9% of all children born in the county; 6.5% of all White babies and 19.9% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 78.9% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 647 babies, 15.2% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 31.7% in 1970.

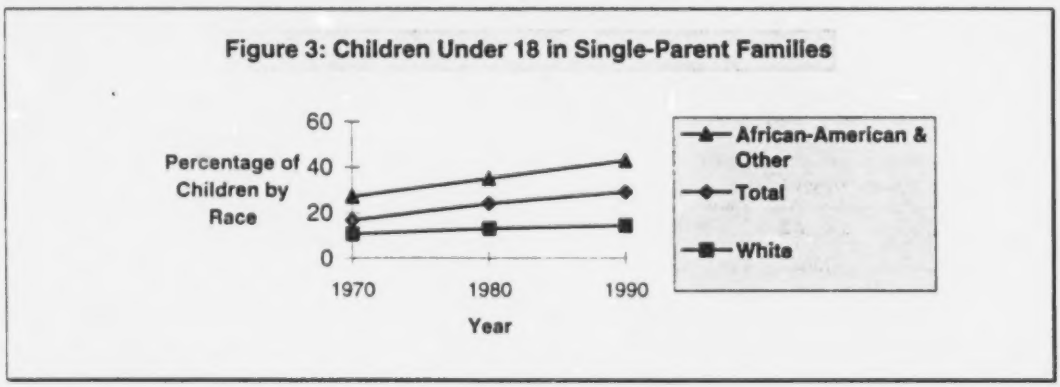
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 1,412 babies, 33.2% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 24.8% and in 1960 it was 10.4%. In 1994, 9.8% of White children and 51.9% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 244 babies, 5.7% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 1,656, constituting 38.9% of all babies, 13.3% of White babies, and 59.4% of African-American and Others.



Divorce Rate: In 1994, 2,917 marriage licenses were issued, while 1,413 divorce decrees involving 1,145 children were filed. In 1970 only 726 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 17,102 children lived with only one parent. This was 29.1% of all children, up from 24.0% in 1980 and 16.7% in 1970. In 1990, 14.4% of White children and 42.9% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 73.9% of mothers with children under 6 and 80.4% with children 6 - 17 were in the labor force. This has increased substantially from 33.9% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 2,938 children investigated as alleged child abuse and neglect victims: 33.6% for physical abuse, 9.8% for sexual abuse, 64.4% for neglect, and 41.6% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 630 children were victims of abuse and neglect: of these 48.5% were male and 51.5% were female; 16.9% were White, and 83.1% were African-American and Other. By age, 44.8% were 0 - 5, 32.7% were 6 - 12, and 22.5% were 13 - 17. They constituted 0.9% of all children age 18 or younger; 0.3% of all Whites and 1.3% of all African-Americans and Others. In the verified cases, 18.9% of abused and neglected children lived in two parent families, 55.7% in single parent families, 11.3% with extended families, and 14.1% in other circumstances.

Family Violence: In 1994, 1,946 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 25.0% of all assaults, which include both simple and aggravated assaults. Overall, 64.9% of all domestic assaults involve spouse abuse (constituting 16.5% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 7.1% of all children did not live with their natural parents; of these, 2,572 or 3.7% of children lived with relatives, 963 or 1.4% lived with non-relatives, and 1370 were in institutional facilities.

Out of Home Placements: As of September 30, 1996, 615 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 17.6% 0-2, 16.6% 3-5, 20.5% 6-10, 13.3% 11-13, and 32.0% 14 and above. The foster care population is comprised of 51.2% males and 48.8% females. Regarding their future, 32.2% were under a plan for placement in adoptive homes, 33.0% for return to a parent or guardian, 3.7% for placement with a relative, 12.4% for independent living, 18.5% for permanent foster care, and 0.2% for other circumstances.

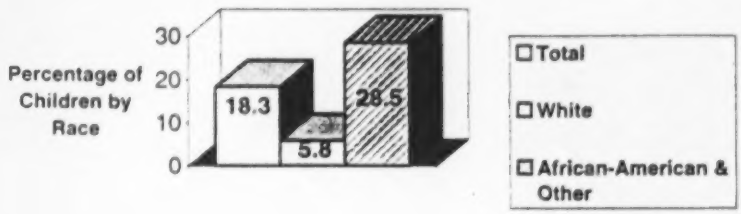
Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 3 adults for every person below age 18. This was up substantially from 1960, when there were only 1.78 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 12,278 children and youth under the age of 18 lived in families with incomes below poverty. Over 18.3% of all children and youth lived below poverty: 5.8% of Whites and 28.5% of African-Americans and others.

Figure 4: Children Living in Poverty



Poverty has always been a serious problem. While the rate among children under age 18 was 18.3% in 1989, it was 20.1% in 1979 and 24.2% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 19.7% of children 0 - 5 and 17.6% of children 6 - 17 lived in poverty; 15.1% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 41.9% of children in single-parent families lived in poverty, but only 6.8% of children in married-couple families were poor. Children in single-parent families made up 72.8% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 16,163 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 3,885 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	67,054	12,278	16,163	20,066	24,246	26,014	27,996
Percent		18.3%	24.1%	29.9%	36.2%	38.8%	41.8%
White	30,117	1,746	2,744	3,865	5,204	5,728	6,472
Percent		5.8%	9.1%	12.8%	17.3%	19.0%	21.5%
African-American and Other	36,937	10,532	13,419	16,201	19,042	20,286	21,524
Percent		28.5%	36.3%	43.9%	51.6%	54.9%	58.3%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 10.6% of households did not have a car; 4.7% of Whites and 20.6% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 5.3% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 10.9% of households had no phone.

Income: The mean income of families with children in 1989 was $39,320; in 1979, it had been $35,824, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 3.2%.

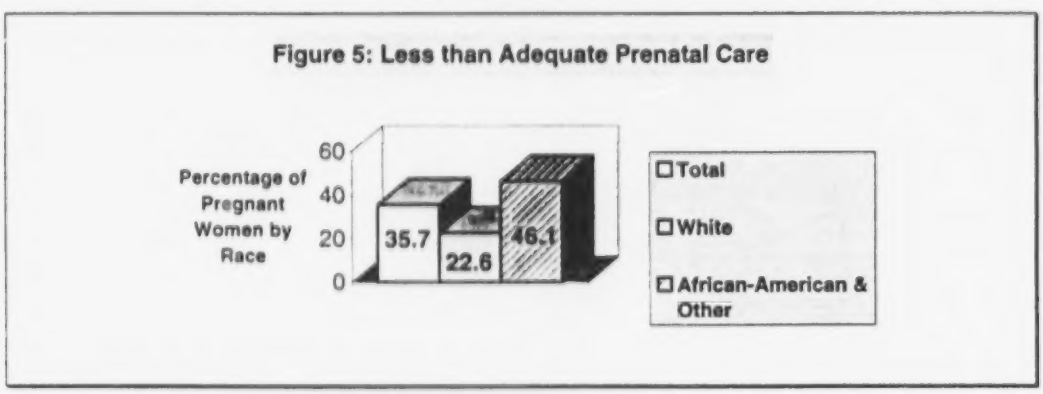
The mean income of single-parent families with children was $17,591 in 1989, as compared with $48,081 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 4,123 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 28.9% had child support court orders. The average monthly payment of child support was $147.98, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 2,367 parents in non-AFDC families were obligated to pay a monthly average of $195.67. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 1,137 or 26.7% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 1,517 or 35.7% of pregnant women received less than adequate prenatal care: 427 or 22.6% of Whites and 1,090 or 46.1% of African-Americans and Others. In that same year, 93 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 453 or 10.6% of all babies in the county were born with low birthweight. Over 14.5% of African-American babies and 5.9% of White babies were born with low birthweight. During 1992-94, approximately 257 or 1.9% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 41.3%. For Whites, the rate decreased by 58.2%, while for African-Americans and Others, the rate decreased by 37.6%. Over the three-year period 1992-94, 22 White and 92 African-American and Other infants died before age one. By comparison, 54 White and 129 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 26 White and 34 African-American and Other children ages 1-14 died in the county. During 1982-84, 29 White and 36 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 56.5% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 34.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 3,249 to 4,874 youth ages 13-19 in the county were infected with a STD. In the county, there were 29 reported cases of children under age 15 and 336 youth ages 15 - 19 infected with gonorrhea; 6 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 12.2% first smoked by age 11, 27.3% by age 13, and 38.8% by age 15. In a typical month, 11.3% of 7th and 8th graders and 19.6% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 34.0% of White 7th to 12th graders used cigarettes, in comparison with 5.8% African-Americans. A smaller but significant group of high school students (4.6%) used smokeless tobacco monthly; it was used primarily by White males (21.8%) compared with 6.0% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 7,470 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 2,084 students in grades 1-12 with learning disabilities and 1,288 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 4,947 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 11,056 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 56 nurses; 31 are currently available.

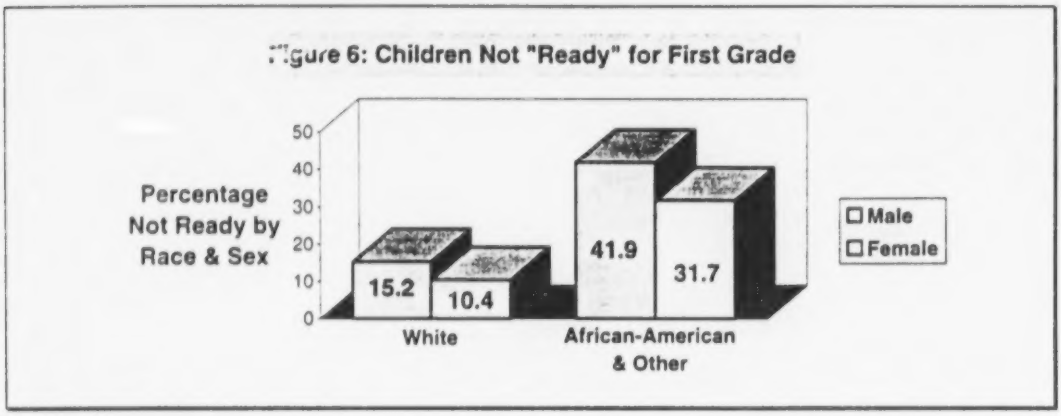
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 19.6% for Whites and 28.9% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

1,056 children not ready	29.5% children not ready

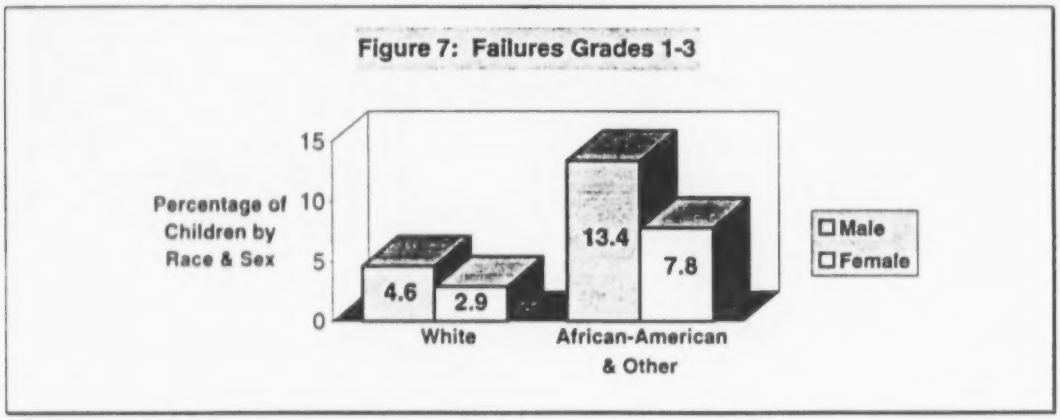


1st Grade Failures in 1995:

196 children failing	5.5% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

294 children failing	8.4% children failing



Overage for Grade 3 in 1996:

437 children overage	14.7% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 982 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 14.8% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 29.5% assessed not ready for the 1st grade, 14.7% overage in grade 3, and 14.8% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

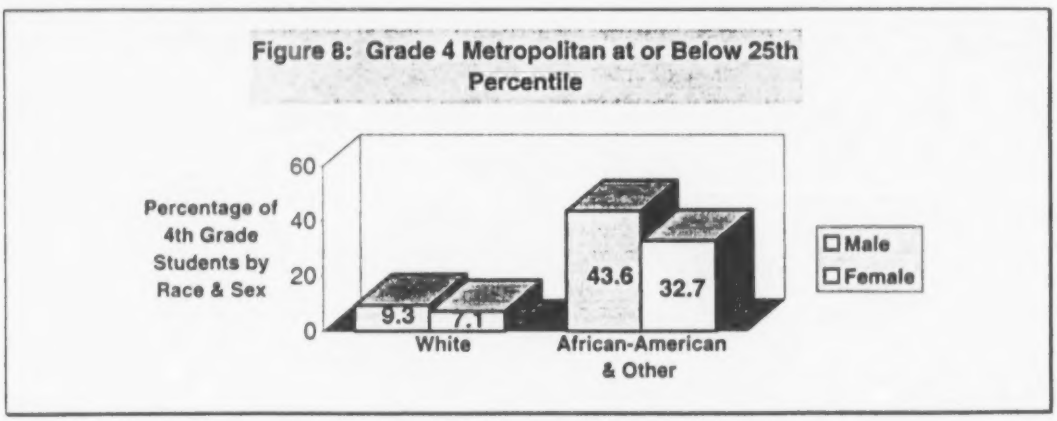
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 1,288 speech and language impaired, 2,084 learning disabled, 491 emotionally disabled, 902 mentally impaired, and 208 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 13.0% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996
(i.e. below 75% of students nationwide)

876 children at or below 25th percentile	27.8% children at or below 25th percentile



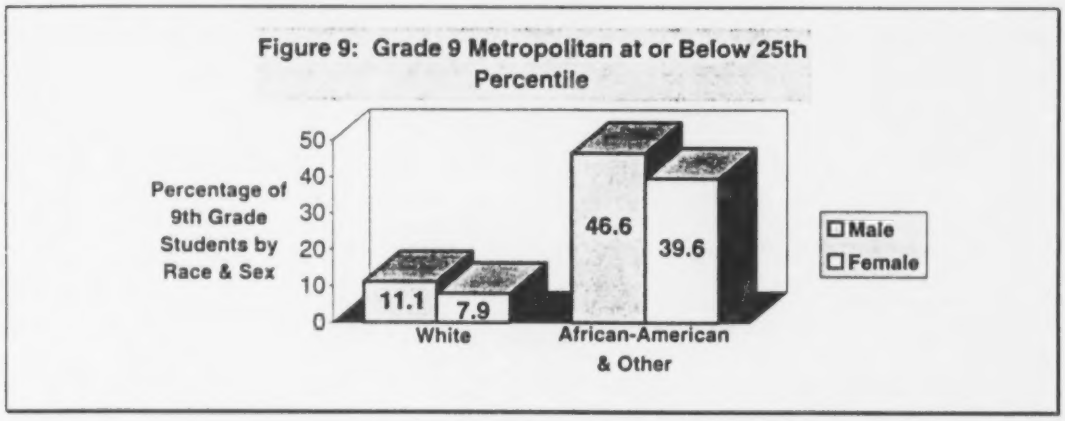
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	1,424	44.6	970	30.4
White Males	75	15.8	71	14.9
White Females	106	21.8	57	11.7
African-American & Other Males	645	56.5	484	42.6
African-American & Other Females	587	54.5	349	32.4

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

1109 students at or below 25th percentile

33.1% students at or below 25th percentile

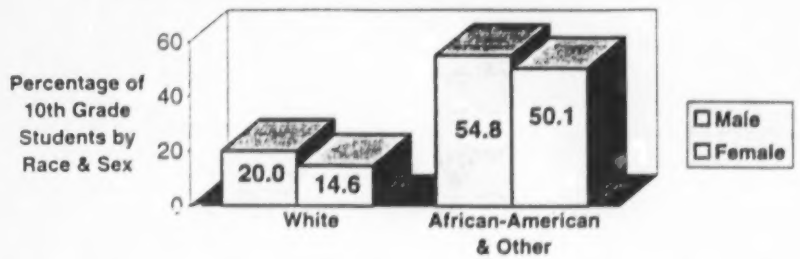


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

1076 students not passing all parts

40.2% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



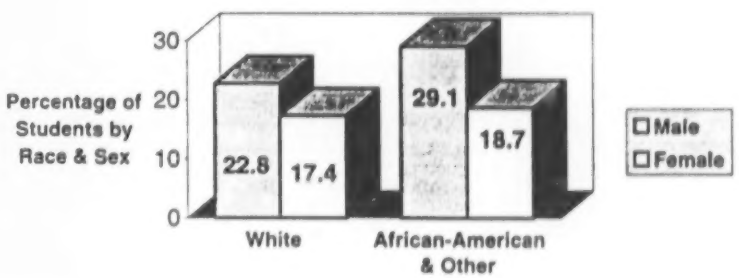
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 56.6% to 36.5% in math and from 40.1% to 25.2% in reading. During the 1990s the trend altered, with 44.6% not meeting 8th grade math standards in 1996 and 30.4% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 30.3% in 1983 on the CTBS, 32.5% in 1990 on the Stanford, and 29.6% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 35.5% in 1990 and 34.1% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

2,779 students drop out

22.5% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 26.0% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 25.9% during 1985-89, and 28.9% during 1990-94. During the 1995-96 period, 95.9% of all who did graduate received the State High School Diploma, while 2.2% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 2.0% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 175 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 213 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 11.8% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 22.5% to 44.6%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 1,546 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 7.2% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

3.7%	White Males	12.1%	African-American & Other Males
5.8%	White Females	7.5%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 363 girls between the ages of 14 and 17 became pregnant in 1993 and 405 in 1994. In 1994, this represented 4.4% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 2.1% for Whites and 6.5% for African-Americans and others. Of all pregnancies to 14-17 year olds, 62.7% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 31.8%.

Alcohol Use: In 1992-93, 21.4% of 7th and 8th graders and 37.0% of high schoolers said they had used alcohol in the past month. Of White males, 40.9% had used it in the past month, compared with 26.9% of African-American males; likewise, 39.5% of White females said they had used alcohol, compared with 23.7% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 19.3% had used alcohol by age 11 or younger, 38.6% by age 13, and 59.2% by age 15.

During the previous year, 30.8% of 7th and 8th graders and 39.6% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 25.6% said they had driven after drinking, and 11.7% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 57.2% of eighth graders and 85.3% of seniors felt that beer was easy to get; 58.3% of eighth graders and 53.5% of seniors felt there was not a great risk in using it regularly.

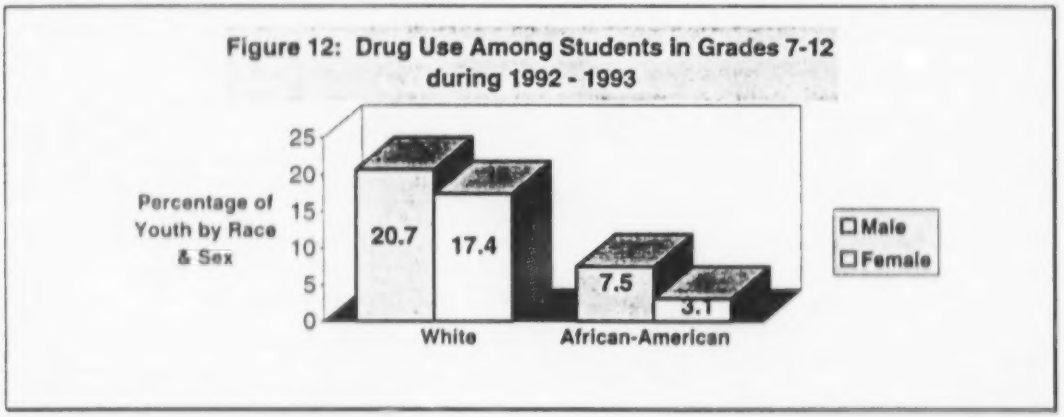
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 25.5% of all high school students in 1992-93 responded 3 or more drinks at a time; 13.9% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 5.6% of 7th and 8th graders and 13.4% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (20.7%) and White females (17.4%); use among African-American males was 7.5%; African-American females, 3.1%. Some young people first used drugs at an early age: among students 15 and older, 3.1% experienced their first use by age 11 or sooner; 8.7% had used a drug by age 13, and 18.3% by age 15.

Of seniors who had initiated use of marijuana, 9.5% had started use at home, 41.4% at a friend's home, and 49.0% elsewhere. During the past year, 4.8% of all high school students said that they used marijuana at home, 10.4% at a friend's house, and 7.1% in a car. In the past year, 7.1% of all high school students who drive and 11.6% of seniors who drive said that they had driven after using drugs . Furthermore, 10.4% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 28.1% of 8th graders who had an opinion said it is easy to get marijuana and 24.3% said it is easy to get cocaine or crack; 74.4% of seniors who had an opinion said it is easy to get marijuana and 63.2% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 21.7% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 1,028 individual juvenile offenders in the county were referred to the Solicitor; of these, 12.2% were age 12 or younger, 32.7% were 13 or 14, and 55.1% were 15 or older.

Of the referrals to the family court, 14.4% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 65 juvenile cases constituting 5.4% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

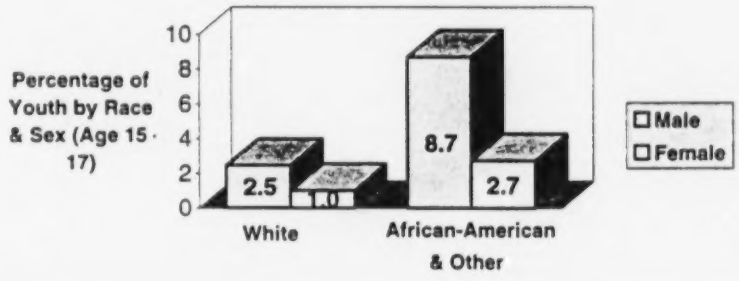
Delinquents are likely to live in families with low income: 47.7% lived in families with income under $10,000, 29.4% with $10,000-$19,999 and 23.0% with $20,000 or more. Furthermore, only 21.5% of delinquents lived with both natural parents, while 56.0% lived in a single parent household and 22.6% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 29.8% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 29.9% had at least one prior referral and 11.8% had been referred to court 3 times or more.

In 1994-95, there were 134 juvenile commitments from the county to State institutions.

During 1994-95, 563 youth ages 15 to 17 were referred to the family courts. In the county, 3.8% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.

Figure 13: Court Referrals



Deaths: During 1990-94, 98 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 28 deaths between 1990 and 1994; homicides killed 28 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 29.1% of children in single-parent families, 18.3% in poverty, 22.5% dropping out of school, 37.0% of high school students using alcohol and 21.7% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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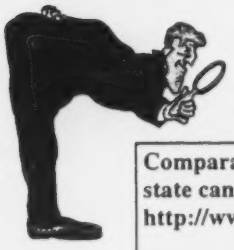
-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.



Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

RICHLAND

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	257	6.0	7.3	0.82	7	1994
Births to Mothers Not Completing High School	647	15.2	21.8	0.70	4	1994
Births to Single Mothers	1,412	33.2	30.4	1.09	17	1994
Children in Single-Parent Families	17,102	29.1	25.1	1.16	27	1990
Parents Working	22,418	78.1	74.3	1.05	39	1990
Abuse & Neglect Victims	630	0.9	1.0	0.90	16	1995-96
Separation from Parents	4,905	7.1	5.1	1.39	38	1990
Economic Status						
Poor Children	12,278	18.3	21.0	0.87	13	1989
Mean Income of Families with Children	$39,320	NA	NA	1.11	5	1989
Health						
Less than Adequate Prenatal Care	1,517	35.7	32.0	1.12	31	1994
Low Birth Weight	453	10.6	9.2	1.15	32	1994
Not Adequately Immunized	1,236	34.0	18.0	1.89	45	1995
Cigarette Smokers (High School)	1,757	19.6	23.1	0.85	19	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	1,056	29.5	28.1	1.05	28	1994-95
1st Grade Failures	196	5.5	6.8	0.81	17	1994-95
Failures grades 1-3 (approx. %)	294	8.4	11.3	0.74	12	1994-95
Overage for Grade 3	437	14.7	16.2	0.91	15	1995-96
Special Education (ages 8 and 9)	982	14.8	15.3	0.97	22	1995-96
School Achievement						
Special Education Grades 1 - 12	4,973	13.0	13.0	1.00	21	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	876	27.8	27.9	1.00	19	1995-96
Grade 8 BSAP - Math (Below standards)	1,424	44.6	34.8	1.28	35	1995-96
Grade 8 BSAP - Reading (Below standards)	970	30.4	28.8	1.06	22	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	1109	33.1	29.5	1.12	24	1995-96
Exit Exam (Not passing all parts on 1st attempt)	1076	40.2	35.3	1.14	24	1995-96
Dropout Rate	2,779	22.5	27.3	0.82	6	1992-95
25-34 Year olds with no HS Degree or GED	6,723	11.8	19.1	0.62	2	1990
Adolescent Risk Behavior						
Not in School or Employed	1,546	7.2	9.6	0.75	5	1990
Pregnancy (Ages 14 - 17)	405	4.4	4.8	0.92	12	1994
Alcohol Use (High School)	3,317	37.0	37.4	0.99	27	1992-93
Drug Use (High School)	1,201	13.4	12.8	1.05	35	1992-93
Binge Drinking (5 or more drinks)	1,246	13.9	16.3	0.85	18	1992-93
Delinquency (ages 15 - 17)	563	3.8	6.4	0.59	3	1994-95

* 1 = "best" 46 = "worst"

RICHLAND TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	248	5.5	0.83	1992	236	5.3	0.80	1993	257	6.0	0.82	1994
Births to Mothers Not Completing High School	713	15.8	0.67	1992	706	15.7	0.70	1993	647	15.2	0.70	1994
Births to Single Mothers	1,469	32.5	1.07	1992	1,462	32.6	1.08	1993	1,412	33.2	1.09	1994
Children in Single-Parent Families		16.7	1.15	1970		24.0	1.27	1980	17,102	29.1	1.16	1990
Economic Status												
Poor Children		24.2	0.84	1969		20.1	0.95	1979	12,278	18.3	0.87	1989
Mean Income of Families with Children					35,824	N/A	0.92	1979	39,320	N/A	0.90	1989
Health												
Less than Adequate Prenatal Care	2,029	44.9	1.14	1992	2,013	44.8	1.27	1993	1,517	35.7	1.12	1994
Low Birth Weight	473	10.5	1.17	1992	489	10.9	1.17	1993	453	10.6	1.15	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	1,052	30.7	1.15	1990-91	991	30.1	1.08	1992-93	1,056	29.5	1.05	1994-95
1st Grade Failures	274	8.4	0.93	1991-92	229	8.3	0.86	1992-93	196	5.5	0.81	1994-95
Failures Grades 1-3 (approx. %)	441	13.7	0.97	1991-92	339	12.4	0.87	1992-93	294	8.4	0.74	1994-95
Overage for Grade 3	690	22.3	0.86	1991-92	532	18.1	0.88	1993-94	437	14.7	0.91	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	733	23.7	1.23	1991-92	583	20.4	1.03	1993-94	876	27.8	1.00	1995-96*
Grade 8 BSAP - Math (Below Standards)	1,072	37.2	1.38	1991-92	1,280	42.3	1.37	1993-94	1,424	44.6	1.28	1995-96
Grade 8 BSAP - Reading (Below Standards)	797	27.6	1.13	1991-92	1,028	34.2	1.19	1993-94	970	30.4	1.06	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	813	25.8	1.18	1991-92	934	29.0	1.19	1993-94	1,109	33.1	1.12	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	844	33.5	1.08	1991-92	917	36.3	1.11	1993-94	1,076	40.2	1.14	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	397	4.4	0.94	1992	363	4.0	0.89	1993	405	4.4	0.92	1994
Alcohol Use (High School)	2,841	37.6	0.94	1989-90					3,317	37.0	0.99	1992-93
Drug Use (High School)	1,045	13.8	1.03	1989-90					1,201	13.4	1.05	1992-93
Binge Drinking (5 or more drinks)		12.5	0.80	1989-90					1,246	13.9	0.85	1992-93

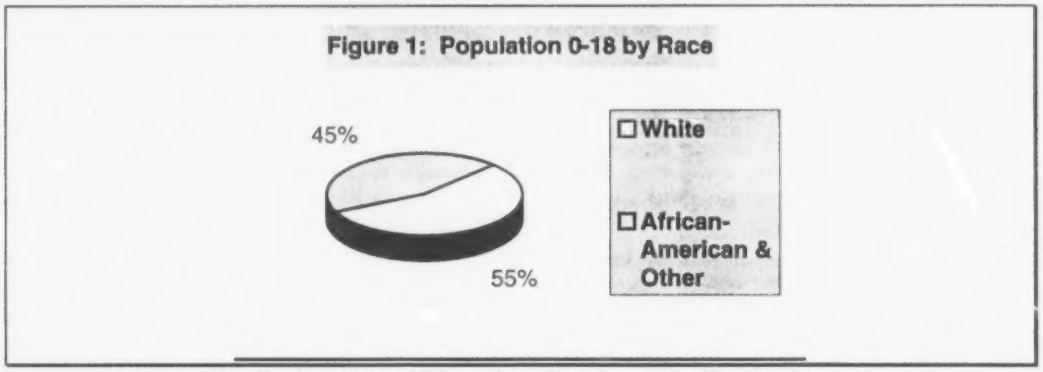
SOUTH CAROLINA kids count

1996 Report SALUDA

DEMOGRAPHICS

In 1994, there were 4,410 children under age 18 in the county. Of these, 2,440 were White and 1,960 were African-American and Other races. There were 4,957 children under age 18 in 1980, 5,497 in 1970, and 6,026 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 26.1% of the population in 1994, down from 41.4% in 1960, 37.8% in 1970 and 30.7% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 34.4% of all households in 1990, as compared with 46.0% of households in 1960, had children below the age of 18.

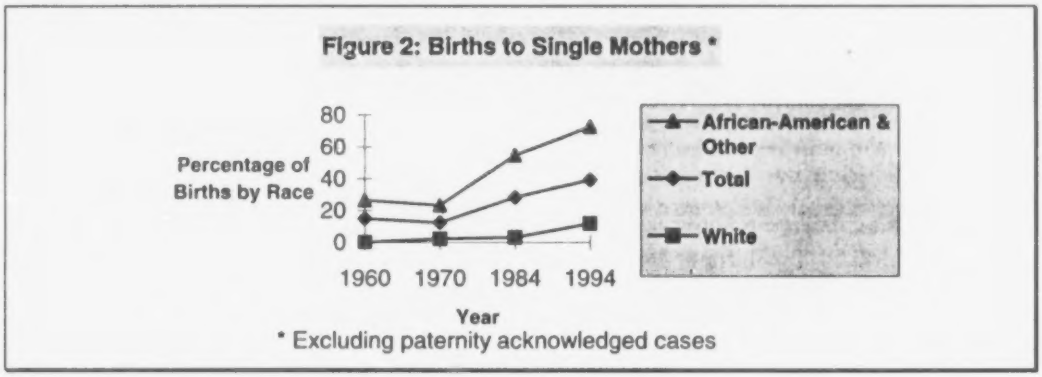
Births to Teen Mothers: In 1994, 12 babies were born to mothers younger than age 18. These babies were 5.2% of all children born in the county; 3.1% of all White babies and 7.6% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 66.7% were born to single mothers.

In 1994, 48 babies were born to mothers younger than age 20. These babies were 20.7% of all children born in the county; 15.7% of all White babies and 26.7% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 66.7% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 64 babies, 27.6% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 44.9% in 1970.

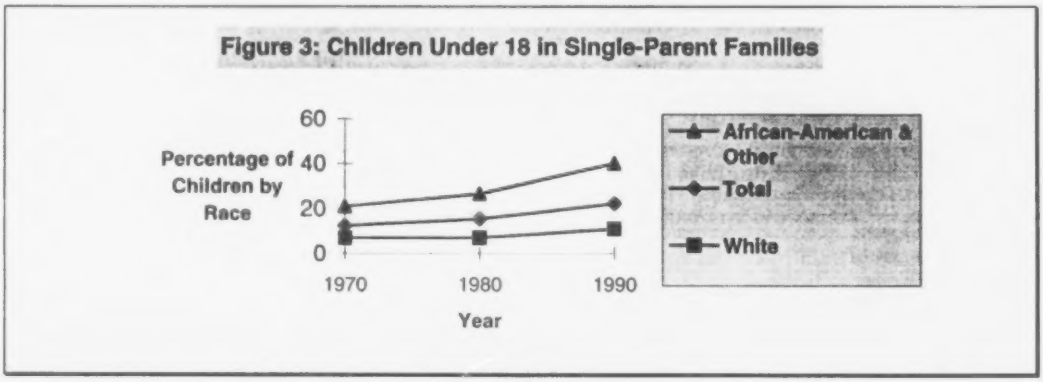
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 91 babies, 39.2% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 28.2% and in 1960 it was 14.8%. In 1994, 11.8% of White children and 72.4% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 3 babies, 1.3% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 94, constituting 40.5% of all babies, 12.6% of White babies, and 74.3% of African-American and Others.



Divorce Rate: In 1994, 153 marriage licenses were issued, while 62 divorce decrees involving 53 children were filed. In 1970 only 27 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 809 children lived with only one parent. This was 22.3% of all children, up from 15.3% in 1980 and 12.4% in 1970. In 1990, 11.0% of White children and 40.1% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 69.9% of mothers with children under 6 and 78.8% with children 6 - 17 were in the labor force. This has increased substantially from 50.0% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 125 children investigated as alleged child abuse and neglect victims: 34.4% for physical abuse, 6.4% for sexual abuse, 49.6% for neglect, and 25.6% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 46 children were victims of abuse and neglect: of these 58.7% were male and 41.3% were female; 43.5% were White, and 56.5% were African-American and Other. By age, 47.8% were 0 - 5, 32.6% were 6 - 12, and 19.6% were 13 - 17. They constituted 1.0% of all children age 18 or younger; 0.8% of all Whites and 1.3% of all African-Americans and Others. In the verified cases, 47.8% of abused and neglected children lived in two parent families, 39.1% in single parent families, 2.2% with extended families, and 10.9% in other circumstances.

Family Violence: In 1994, 40 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 20.0% of all assaults, which include both simple and aggravated assaults. Overall, 70.0% of all domestic assaults involve spouse abuse (constituting 13.9% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 8.3% of all children did not live with their natural parents; of these, 169 or 3.9% of children lived with relatives, 187 or 4.3% lived with non-relatives, and 0 were in institutional facilities.

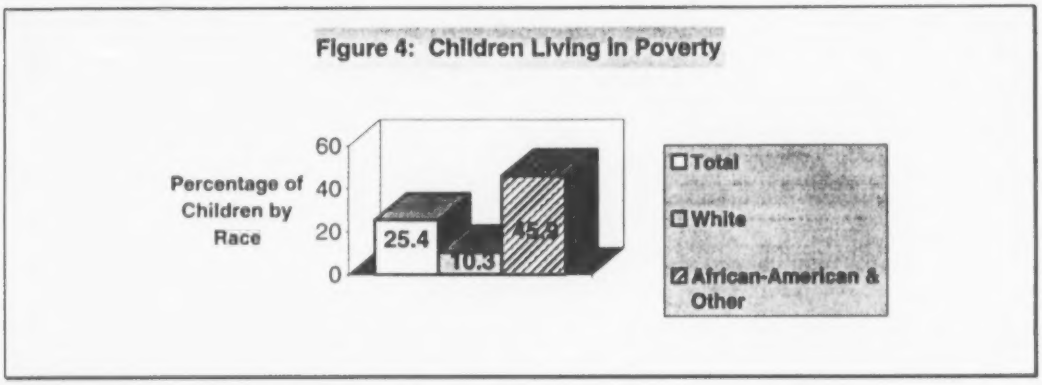
Out of Home Placements: As of September 30, 1996, 38 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 7.9% 0-2, 21.1% 3-5, 13.2% 6-10, 15.8% 11-13, and 42.1% 14 and above. The foster care population is comprised of 42.1% males and 57.9% females. Regarding their future, 23.7% were under a plan for placement in adoptive homes, 15.8% for return to a parent or guardian, 10.5% for placement with a relative, 18.4% for independent living, 31.6% for permanent foster care, and 0.0% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.83 adults for every person below age 18. This was up substantially from 1960, when there were only 1.42 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 1,052 children and youth under the age of 18 lived in families with incomes below poverty. Over 25.4% of all children and youth lived below poverty: 10.3% of Whites and 45.9% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 25.4% in 1989, it was 27.3% in 1979 and 26.8% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 26.3% of children 0 - 5 and 25.1% of children 6 - 17 lived in poverty; 20.7% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 58.4% of children in single-parent families lived in poverty, but only 15.4% of children in married-couple families were poor. Children in single-parent families made up 51.9% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 1,412 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 360 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	4,139	1,052	1,412	1,607	1,907	2,019	2,162
Percent		25.4%	34.1%	38.8%	46.1%	48.8%	52.2%
White	2,380	244	391	438	572	663	750
Percent		10.3%	16.4%	18.4%	24.0%	27.9%	31.5%
African-American and Other	1,759	808	1,021	1,169	1,335	1,356	1,412
Percent		45.9%	58.0%	66.5%	75.9%	77.1%	80.3%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 10.7% of households did not have a car; 5.2% of Whites and 25.1% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 16.1% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 42.3% of households had no phone.

Income: The mean income of families with children in 1989 was $31,103; in 1979, it had been $28,722, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 3.0%.

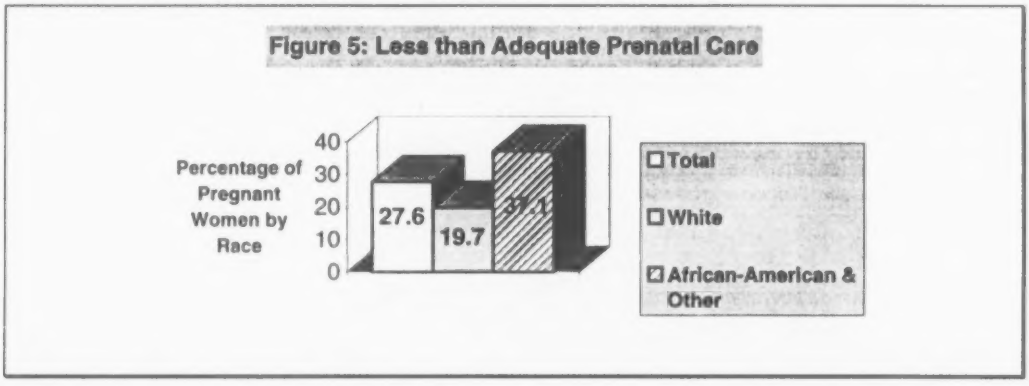
The mean income of single-parent families with children was $11,640 in 1989, as compared with $35,476 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 231 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 56.7% had child support court orders. The average monthly payment of child support was $153.20, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 109 parents in non-AFDC families were obligated to pay a monthly average of $171.04. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 52 or 22.4% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 64 or 27.6% of pregnant women received less than adequate prenatal care: 25 or 19.7% of Whites and 39 or 37.1% of African-Americans and Others. In that same year, 3 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 27 or 11.6% of all babies in the county were born with low birthweight. Over 15.2% of African-American babies and 8.7% of White babies were born with low birthweight. During 1992-94, approximately 9 or 1.3% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 26.3%. For Whites, the rate decreased by 29.6%, while for African-Americans and Others, the rate decreased by 23.1%. Over the three-year period 1992-94, 4 White and 3 African-American and Other infants died before age one. By comparison, 6 White and 5 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 2 White and 3 African-American and Other children ages 1-14 died in the county. During 1982-84, 3 White and 4 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 49.9% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 9.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 171 to 257 youth ages 13-19 in the county were infected with a STD. In the county, there were no reported cases of children under age 15 and 10 youth ages 15 - 19 infected with gonorrhea; 1 youth ages 15 - 19 was reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 14.5% first smoked by age 11, 33.1% by age 13, and 44.8% by age 15. In a typical month, 10.3% of 7th and 8th graders and 23.2% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 27.4% of White 7th to 12th graders used cigarettes, in comparison with 5.4% African-Americans. A smaller but significant group of high school students (5.3%) used smokeless tobacco monthly; it was used primarily by White males (17.0%) compared with 6.0% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 441 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 135 students in grades 1-12 with learning disabilities and 101 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 302 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 653 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 3 nurses; 2 are currently available.

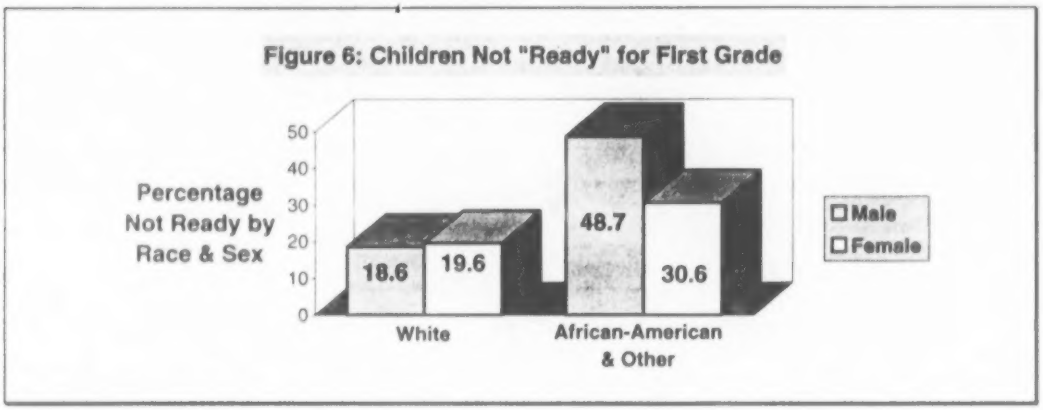
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 23.9% for Whites and 22.0% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

49 children not ready	28.8% children not ready

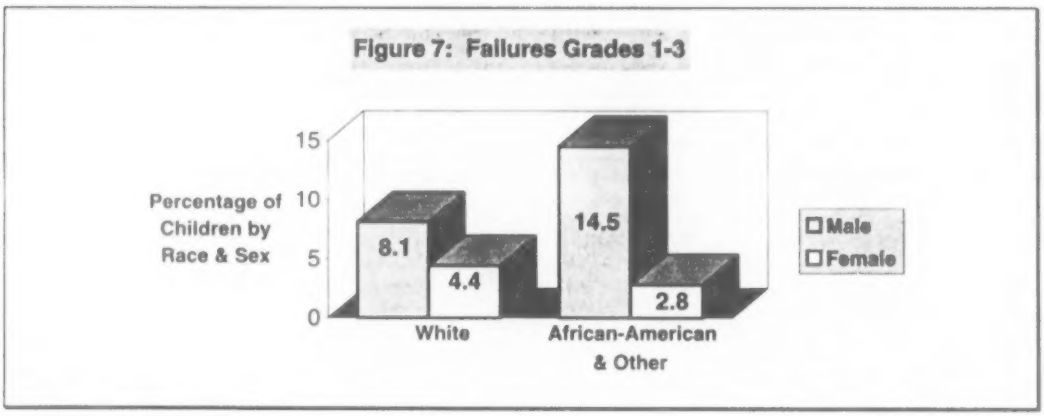


1st Grade Failures in 1995:

7 children failing	3.9% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

13 children failing	7.4% children failing



Overage for Grade 3 in 1996:

21 children overage	14.2% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 66 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 19.7% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 28.8% assessed not ready for the 1st grade, 14.2% overage in grade 3, and 19.7% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

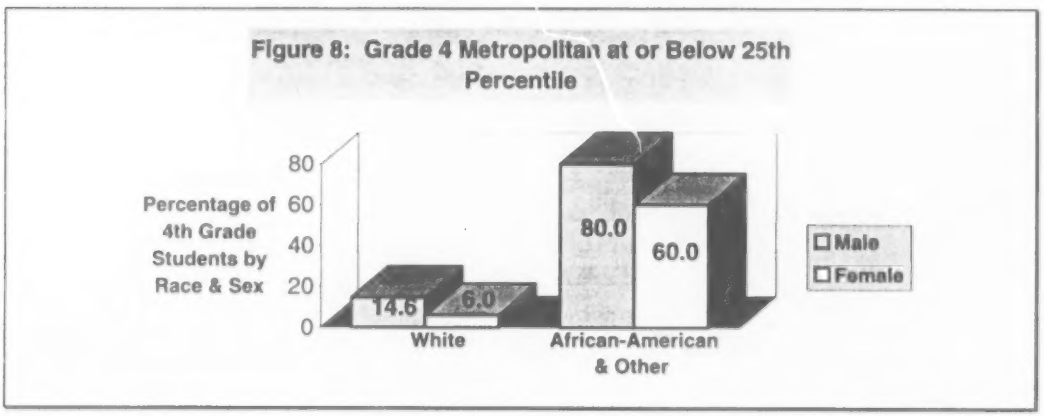
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 101 speech and language impaired, 135 learning disabled, 22 emotionally disabled, 103 mentally impaired, and 25 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 19.3% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

51 children at or below 25th percentile	33.8% children at or below 25th percentile



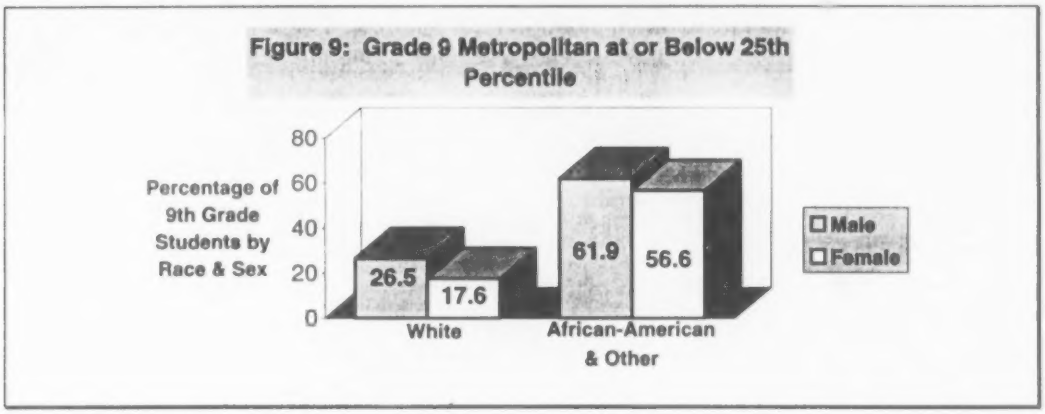
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	78	46.2	59	34.9
White Males	25	39.7	25	39.7
White Females	13	28.9	7	15.6
African-American & Other Males	15	57.7	13	50.0
African-American & Other Females	24	70.6	13	38.2

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

74 students at or below 25th percentile

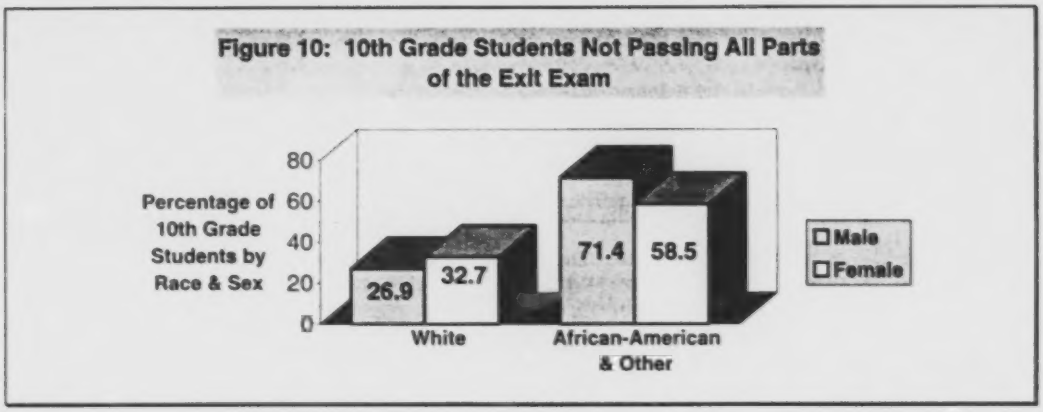
41.1% students at or below 25th percentile



Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

67 students not passing all parts

46.5% students not passing all parts

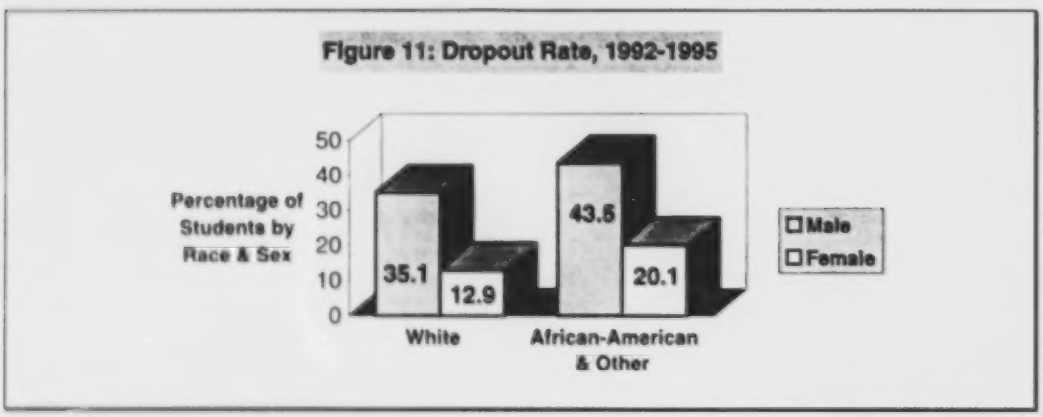


Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 55.6% to 29.2% in math and from 45.6% to 23.8% in reading. During the 1990s the trend altered, with 46.2% not meeting 8th grade math standards in 1996 and 34.9% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 30.0% in 1983 on the CTBS, 33.5% in 1990 on the Stanford, and 34.6% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 36.8% in 1990 and 46.7% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

193 students drop out

28.0% students drop out



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Dropouts: A distressing number of students drop out and fail to graduate. An average 34.9% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 32.0% during 1985-89, and 29.7% during 1990-94. During the 1995-96 period, 88.2% of all who did graduate received the State High School Diploma, while 8.4% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 3.4% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 8 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 16 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 25.9% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 28.0% to 46.5%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 130 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 12.6% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

7.1%	White Males	1.1%	African-American & Other Males
15.9%	White Females	23.1%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 19 girls between the ages of 14 and 17 became pregnant in 1993 and 17 in 1994. In 1994, this represented 3.7% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 1.5% for Whites and 6.5% for African-Americans and others. Of all pregnancies to 14-17 year olds, 70.6% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 19.2%.

Alcohol Use: In 1992-93, 20.0% of 7th and 8th graders and 35.6% of high schoolers said they had used alcohol in the past month. Of White males, 32.4% had used it in the past month, compared with 31.4% of African-American males; likewise, 34.2% of White females said they had used alcohol, compared with 17.8% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 15.5% had used alcohol by age 11 or younger, 37.7% by age 13, and 60.0% by age 15.

During the previous year, 43.5% of 7th and 8th graders and 53.4% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 30.2% said they had driven after drinking, and 12.5% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 55.3% of eighth graders and 83.1% of seniors felt that beer was easy to get; 46.5% of eighth graders and 54.4% of seniors felt there was not a great risk in using it regularly.

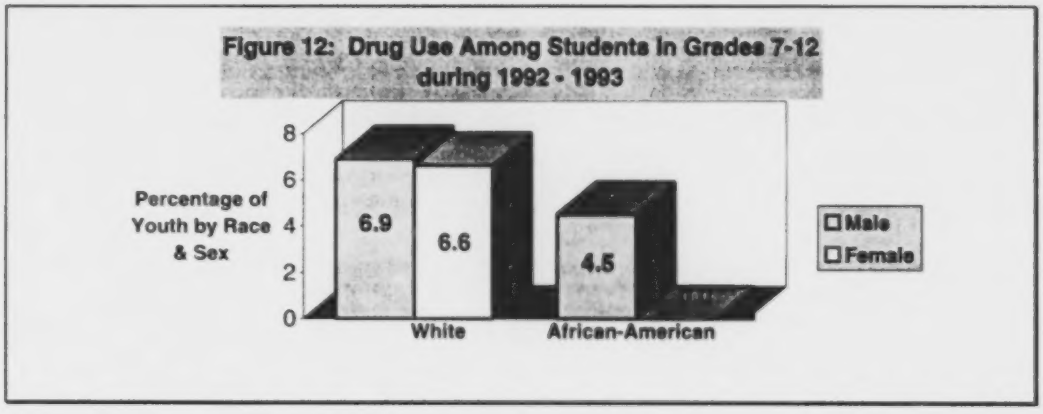
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 24.8% of all high school students in 1992-93 responded 3 or more drinks at a time; 15.9% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 1.9% of 7th and 8th graders and 6.6% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (6.9%) and White females (6.6%); use among African-American males was 4.5%; African-American females, 0.0%. Some young people first used drugs at an early age: among students 15 and older, 3.0% experienced their first use by age 11 or sooner; 7.6% had used a drug by age 13, and 13.5% by age 15.

Of seniors who had initiated use of marijuana, 0.0% had started use at home, 45.5% at a friend's home, and 54.5% elsewhere. During the past year, 2.4% of all high school students said that they used marijuana at home, 7.0% at a friend's house, and 4.4% in a car. In the past year, 4.0% of all high school students who drive and 5.7% of seniors who drive said that they had driven after using drugs . Furthermore, 4.5% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 19.3% of 8th graders who had an opinion said it is easy to get marijuana and 10.8% said it is easy to get cocaine or crack; 73.3% of seniors who had an opinion said it is easy to get marijuana and 54.7% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 10.7% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 83 individual juvenile offenders in the county were referred to the Solicitor; of these, 10.8% were age 12 or younger, 30.1% were 13 or 14, and 59.0% were 15 or older.

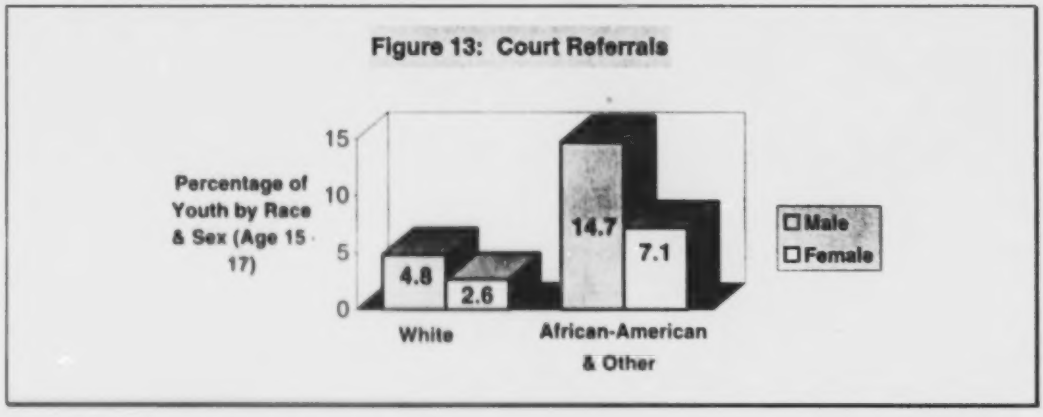
Of the referrals to the family court, 25.8% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 12 juvenile cases constituting 12.4% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 27.4% lived in families with income under $10,000, 38.4% with $10,000-$19,999 and 34.2% with $20,000 or more. Furthermore, only 22.4% of delinquents lived with both natural parents, while 56.6% lived in a single parent household and 21.1% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 52.7% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 25.3% had at least one prior referral and 8.4% had been referred to court 3 times or more.

In 1994-95, there were 3 juvenile commitments from the county to State institutions.

During 1994-95, 48 youth ages 15 to 17 were referred to the family courts. In the county, 6.7% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 3 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 2 deaths between 1990 and 1994; homicides killed 0 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 22.3% of children in single-parent families, 25.4% in poverty, 28.0% dropping out of school, 35.6% of high school students using alcohol and 10.7% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
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Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

SALUDA

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	12	5.2	7.3	0.71	3	1994
Births to Mothers Not Completing High School	64	27.6	21.8	1.27	35	1994
Births to Single Mothers	91	39.2	30.4	1.29	25	1994
Children in Single-Parent Families	809	22.3	25.1	0.89	10	1990
Parents Working	1,318	76.3	74.3	1.03	31	1990
Abuse & Neglect Victims	46	1.0	1.0	1.00	22	1995-96
Separation from Parents	356	8.3	5.1	1.63	42	1990
Economic Status						
Poor Children	1,052	25.4	21.0	1.21	25	1989
Mean Income of Families with Children	$31,103	NA	NA	0.87	27	1989
Health						
Less than Adequate Prenatal Care	64	27.6	32.0	0.86	11	1994
Low Birth Weight	27	11.6	9.2	1.26	38	1994
Not Adequately Immunized	31	9.0	18.0	0.50	13	1995
Cigarette Smokers (High School)	117	23.2	23.1	1.00	28	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	49	28.8	28.1	1.02	25	1994-95
1st Grade Failures	7	3.9	6.8	0.57	8	1994-95
Failures grades 1-3 (approx. %)	13	7.4	11.3	0.65	7	1994-95
Overage for Grade 3	21	14.2	16.2	0.88	13	1995-96
Special Education (ages 8 and 9)	66	19.7	15.3	1.29	40	1995-96
School Achievement						
Special Education Grades 1 - 12	386	19.3	13.0	1.48	45	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	51	33.8	27.9	1.21	26	1995-96
Grade 8 BSAP - Math (Below standards)	78	46.2	34.8	1.33	36	1995-96
Grade 8 BSAP - Reading (Below standards)	59	34.9	28.8	1.21	28	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	74	41.1	29.5	1.39	37	1995-96
Exit Exam (Not passing all parts on 1st attempt)	67	46.5	35.3	1.32	32	1995-96
Dropout Rate	193	28.0	27.3	1.03	25	1992-95
25-34 Year olds with no HS Degree or GED	638	25.9	19.1	1.36	31	1990
Adolescent Risk Behavior						
Not in School or Employed	130	12.6	9.6	1.31	37	1990
Pregnancy (Ages 14 - 17)	17	3.7	4.8	0.77	4	1994
Alcohol Use (High School)	179	35.6	37.4	0.95	21	1992-93
Drug Use (High School)	33	6.6	12.8	0.52	10	1992-93
Binge Drinking (5 or more drinks)	80	15.9	16.3	0.98	22	1992-93
Delinquency (ages 15 - 17)	48	6.7	6.4	1.05	25	1994-95

* 1 = "best" 46 = "worst"

SALUDA TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	17	7.5	1.14	1992	15	6.6	1.00	1993	12	5.2	0.71	1994
Births to Mothers Not Completing High School	53	23.5	1.00	1992	58	25.4	1.13	1993	64	27.6	1.27	1994
Births to Single Mothers	93	41.2	1.36	1992	85	37.3	1.23	1993	91	39.2	1.29	1994
Children in Single-Parent Families		12.4	0.86	1970		15.3	0.81	1980	809	22.3	0.89	1990
Economic Status												
Poor Children		26.8	0.93	1969		27.3	1.29	1979	1,052	25.4	1.21	1989
Mean Income of Families with Children					28,722	N/A	1.15	1979	31,103	N/A	1.14	1989
Health												
Less than Adequate Prenatal Care	85	37.6	0.95	1992	64	28.1	0.80	1993	64	27.6	0.86	1994
Low Birth Weight	16	7.1	0.79	1992	22	9.6	1.03	1993	27	11.6	1.26	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	61	28.5	1.07	1990-91	47	26.1	0.94	1992-93	49	28.8	1.02	1994-95
1st Grade Failures	3	1.4	0.16	1991-92	25	12.8	1.32	1992-93	7	3.9	0.57	1994-95
Failures Grades 1-3 (approx. %)	6	3.1	0.22	1991-92	34	18.3	1.28	1992-93	13	7.4	0.65	1994-95
Overage for Grade 3	55	30.9	1.19	1991-92	41	22.7	1.11	1993-94	21	14.2	0.88	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	59	31.6	1.64	1991-92	47	30.7	1.55	1993-94	51	33.8	1.21	1995-96*
Grade 8 BSAP - Math (Below Standards)	48	32.4	1.20	1991-92	44	29.5	0.95	1993-94	78	46.2	1.33	1995-96
Grade 8 BSAP - Reading (Below Standards)	50	33.6	1.38	1991-92	48	32.2	1.12	1993-94	59	34.9	1.21	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	60	34.9	1.59	1991-92	32	22.5	0.93	1993-94	74	41.1	1.39	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	59	40.4	1.30	1991-92	48	38.7	1.18	1993-94	67	46.5	1.32	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	29	6.4	1.36	1992	19	4.2	0.93	1993	17	3.7	0.77	1994
Alcohol Use (High School)	209	40.9	1.02	1989-90					179	35.6	0.95	1992-93
Drug Use (High School)	70	13.7	1.02	1989-90					33	6.6	0.52	1992-93
Binge Drinking (5 or more drinks)		16.8	1.08	1989-90					80	15.9	0.98	1992-93

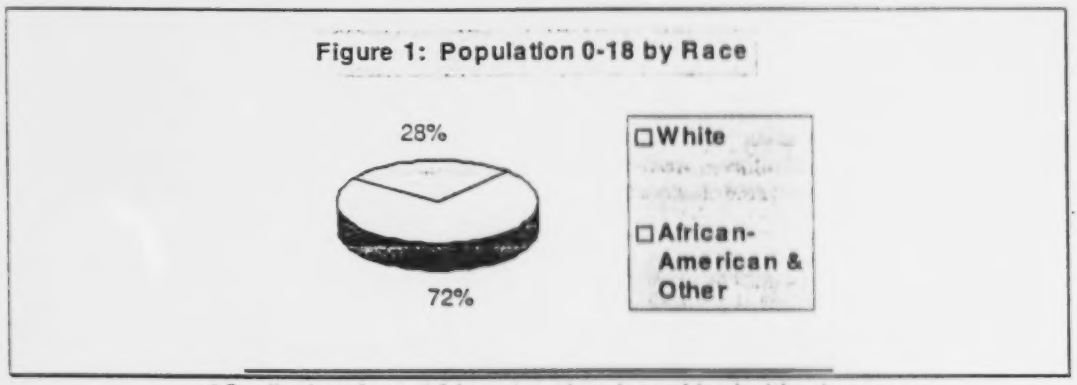
SOUTH CAROLINA kids count

1996 Report SPARTANBURG

DEMOGRAPHICS

In 1994, there were 58,620 children under age 18 in the county. Of these, 42,200 were White and 16,420 were African-American and Other races. There were 57,724 children under age 18 in 1980, 59,350 in 1970, and 59,221 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 24.7% of the population in 1994, down from 37.8% in 1960, 34.2% in 1970 and 28.6% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 33.5% of all households in 1990, as compared with 46.0% of households in 1960, had children below the age of 18.

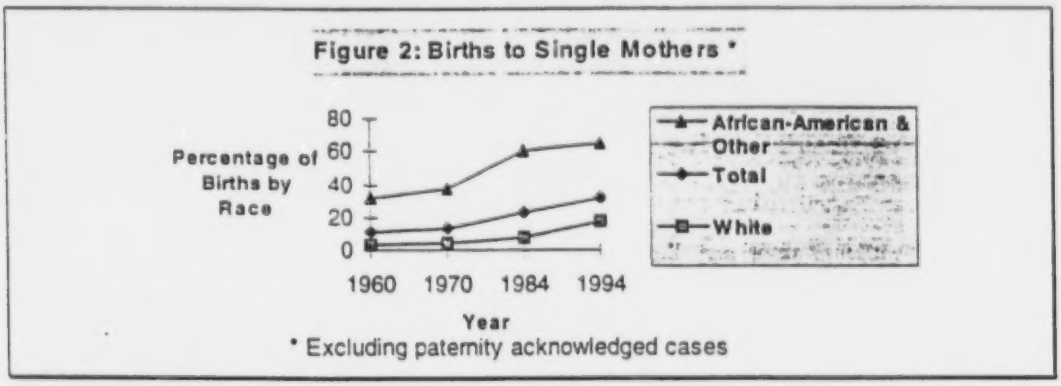
Births to Teen Mothers: In 1994, 229 babies were born to mothers younger than age 18. These babies were 7.2% of all children born in the county; 5.3% of all White babies and 11.9% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 76.0% were born to single mothers.

In 1994, 519 babies were born to mothers younger than age 20. These babies were 16.4% of all children born in the county; 13.2% of all White babies and 24.3% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 68.6% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 808 babies, 25.6% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 47.8% in 1970.

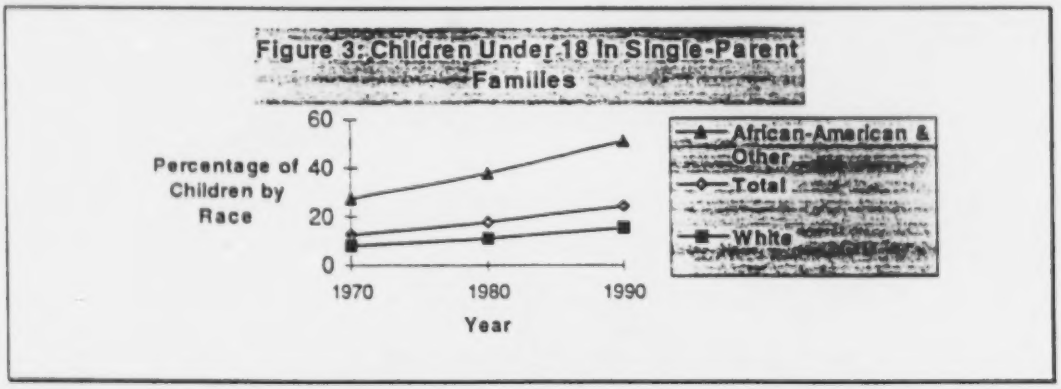
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 990 babies, 31.3% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 22.9% and in 1960 it was 11.2%. In 1994, 17.7% of White children and 64.7% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 165 babies, 5.2% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 1,155, constituting 36.5% of all babies, 22.3% of White babies, and 71.3% of African-American and Others.



Divorce Rate: In 1994, 2,307 marriage licenses were issued, while 1,332 divorce decrees involving 1,056 children were filed. In 1970 only 506 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 11,800 children lived with only one parent. This was 24.2% of all children, up from 17.6% in 1980 and 12.8% in 1970. In 1990, 15.4% of White children and 51.2% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 67.0% of mothers with children under 6 and 79.5% with children 6 - 17 were in the labor force. This has increased substantially from 42.4% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

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Abuse and Neglect: In 1995-96, there were 1,943 children investigated as alleged child abuse and neglect victims: 39.0% for physical abuse, 12.8% for sexual abuse, 61.6% for neglect, and 16.9% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 672 children were victims of abuse and neglect: of these 48.2% were male and 51.8% were female; 54.3% were White, and 45.7% were African-American and Other. By age, 39.6% were 0 - 5, 38.1% were 6 - 12, and 22.3% were 13 - 17. They constituted 1.1% of all children age 18 or younger; 0.9% of all Whites and 1.8% of all African-Americans and Others. In the verified cases, 34.4% of abused and neglected children lived in two parent families, 51.0% in single parent families, 6.0% with extended families, and 8.6% in other circumstances.

Family Violence: In 1994, 2,580 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 33.0% of all assaults, which include both simple and aggravated assaults. Overall, 59.0% of all domestic assaults involve spouse abuse (constituting 19.6% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 4.7% of all children did not live with their natural parents; of these, 1,458 or 2.6% of children lived with relatives, 846 or 1.5% lived with non-relatives, and 306 were in institutional facilities.

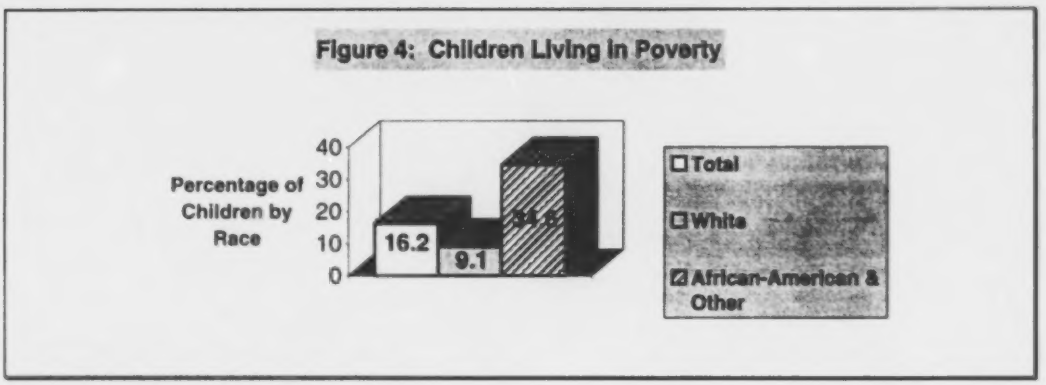
Out of Home Placements: As of September 30, 1996, 268 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 13.4% 0-2, 13.8% 3-5, 22.8% 6-10, 15.3% 11-13, and 34.7% 14 and above. The foster care population is comprised of 44.8% males and 55.2% females. Regarding their future, 17.2% were under a plan for placement in adoptive homes, 56.3% for return to a parent or guardian, 2.6% for placement with a relative, 14.6% for independent living, 9.0% for permanent foster care, and 0.4% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 3.05 adults for every person below age 18. This was up substantially from 1960, when there were only 1.65 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 8,891 children and youth under the age of 18 lived in families with incomes below poverty. Over 16.2% of all children and youth lived below poverty: 9.1% of Whites and 34.6% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 16.2% in 1989, it was 17.0% in 1979 and 20.5% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 18.8% of children 0 - 5 and 14.9% of children 6 - 17 lived in poverty; 18.1% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 43.5% of children in single-parent families lived in poverty, but only 5.8% of children in married-couple families were poor. Children in single-parent families made up 71.2% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 11,562 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 2,671 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	54,958	8,891	11,562	14,910	17,994	19,429	21,201
Percent		16.2%	21.0%	27.1%	32.7%	35.4%	38.6%
White	39,773	3,636	4,954	7,039	9,150	10,212	11,579
Percent		9.1%	12.5%	17.7%	23.0%	25.7%	29.1%
African-American and Other	15,185	5,255	6,608	7,871	8,844	9,217	9,622
Percent		34.6%	43.5%	51.8%	58.2%	60.7%	63.4%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 10.4% of households did not have a car; 7.0% of Whites and 25.0% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 8.8% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 20.5% of households had no phone.

Income: The mean income of families with children in 1989 was $37,116; in 1979, it had been $34,534, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 5.3%.

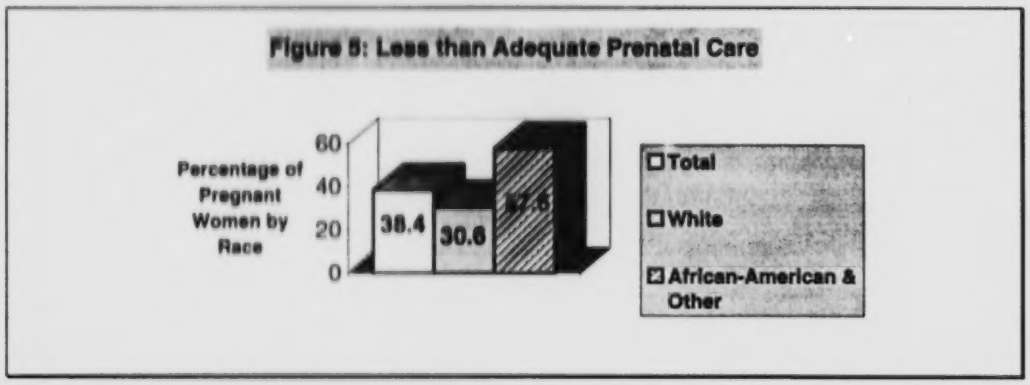
The mean income of single-parent families with children was $16,282 in 1989, as compared with $43,618 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 2,309 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 33.5% had child support court orders. The average monthly payment of child support was $148.99, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 1,461 parents in non-AFDC families were obligated to pay a monthly average of $206.66. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 1,034 or 32.7% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 1,215 or 38.4% of pregnant women received less than adequate prenatal care: 687 or 30.6% of Whites and 528 or 57.6% of African-Americans and Others. In that same year, 47 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 278 or 8.8% of all babies in the county were born with low birthweight. Over 12.9% of African-American babies and 7.1% of White babies were born with low birthweight. During 1992-94, approximately 170 or 1.7% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 50.4%. For Whites, the rate decreased by 50.3%, while for African-Americans and Others, the rate decreased by 52.0%. Over the three-year period 1992-94, 48 White and 32 African-American and Other infants died before age one. By comparison, 90 White and 56 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 25 White and 16 African-American and Other children ages 1-14 died in the county. During 1982-84, 35 White and 14 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 47.6% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 21.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 2,352 to 3,528 youth ages 13-19 in the county were infected with a STD. In the county, there were 8 reported cases of children under age 15 and 137 youth ages 15 - 19 infected with gonorrhea; 2 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 12.8% first smoked by age 11, 30.7% by age 13, and 42.6% by age 15. In a typical month, 14.8% of 7th and 8th graders and 24.3% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 25.7% of White 7th to 12th graders used cigarettes, in comparison with 4.9% African-Americans. A smaller but significant group of high school students (8.0%) used smokeless tobacco monthly; it was used primarily by White males (20.3%) compared with 5.0% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 5,862 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 1,992 students in grades 1-12 with learning disabilities and 1,199 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 3,900 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 8,676 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 51 nurses; 16 are currently available.

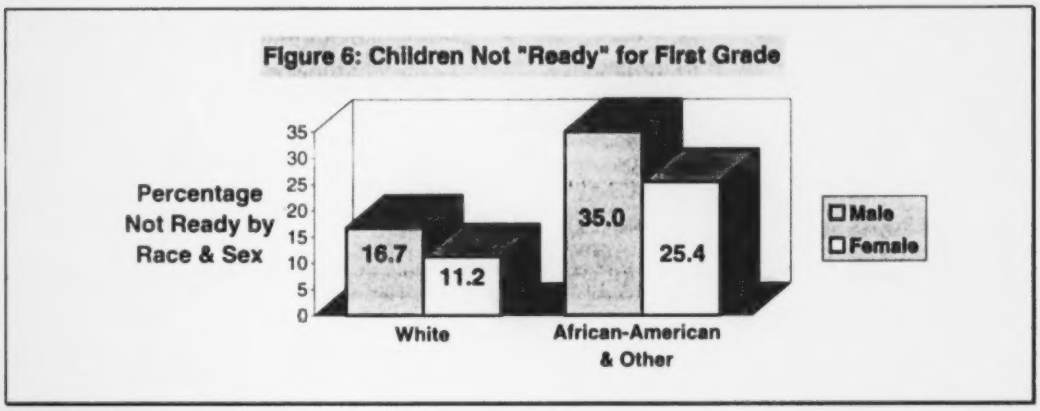
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 35.0% for Whites and 36.8% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

655 children not ready	19.3% children not ready

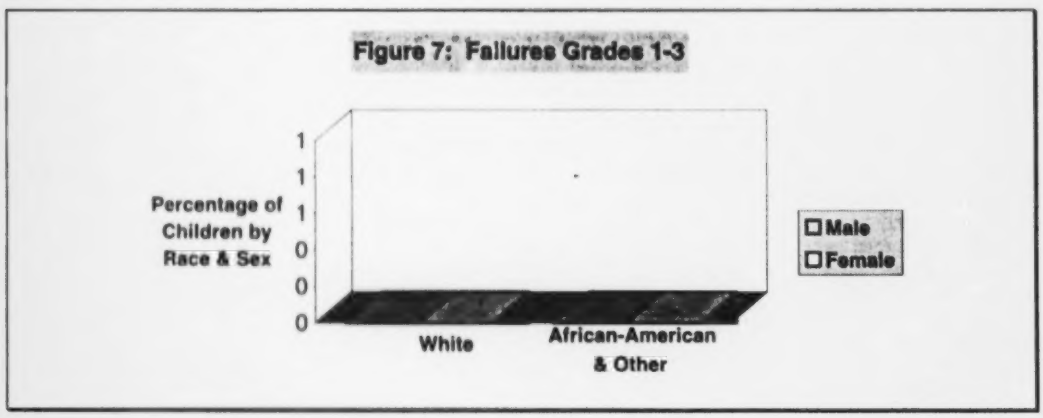


1st Grade Failures in 1995: **

NA	children failing	NA	% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995: **

NA	children failing	NA	% children failing



**** Data is not available for 1995. However, the 1995 Kids Count report found 232 children, 8.5% failed 1st Grade in 1993.**
309 children, 11.5% failed in grades 1-3 in 1993 (10.1% White males, 7.1% White females, 20.5% African American and Other males, and 14.8% African American and Other females).

Overage for Grade 3 in 1996:

444 children overage	15.5% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 985 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 16.1% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 19.3% assessed not ready for the 1st grade, 15.5% overage in grade 3, and 16.1% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

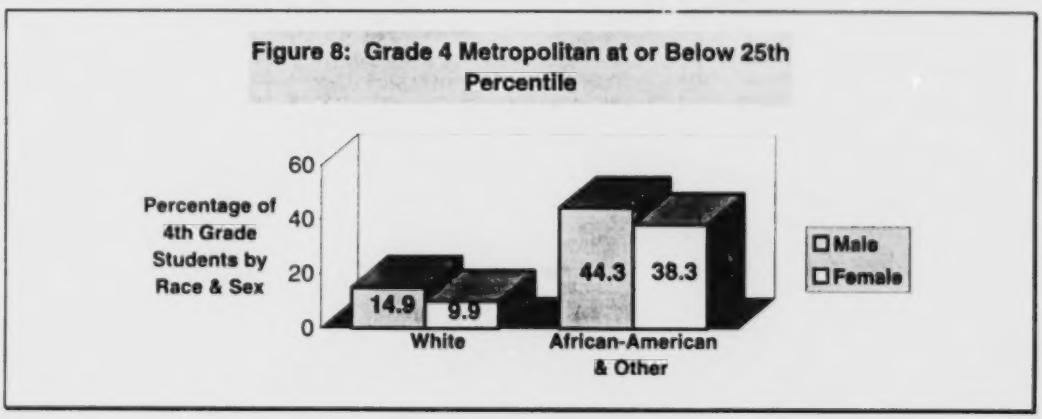
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 1,199 speech and language impaired, 1,992 learning disabled, 452 emotionally disabled, 898 mentally impaired, and 175 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 13.4% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996
(i.e. below 75% of students nationwide)

575 children at or below 25th percentile	20.6% children at or below 25th percentile



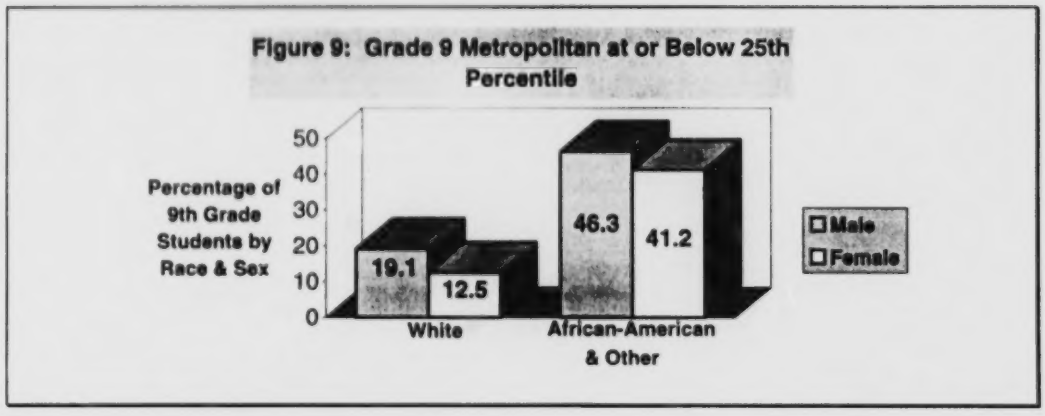
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	828	28.1	789	26.9
White Males	205	19.9	220	21.4
White Females	216	20.2	174	16.3
African-American & Other Males	189	47.7	212	53.5
African-American & Other Females	212	49.0	178	41.2

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

680 students
at or below 25th percentile

23.7% students
at or below 25th percentile

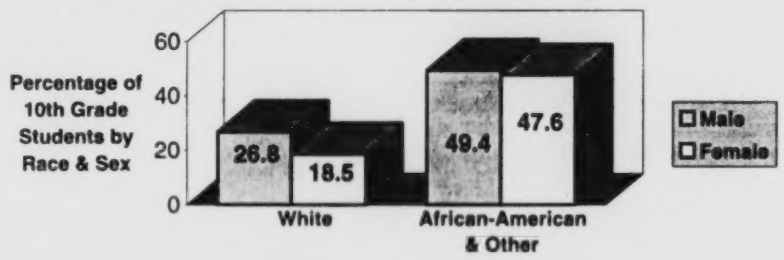


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

734 students
not passing
all parts

29.2% students
not passing
all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam

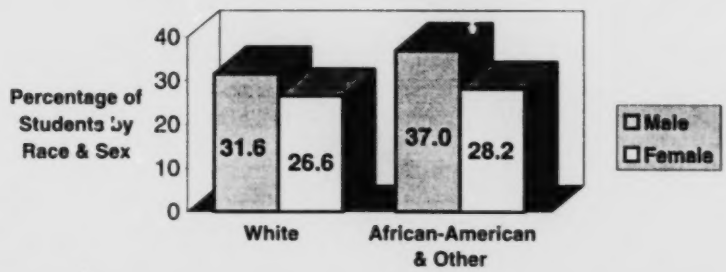


Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 47.7% to 24.5% in math and from 41.6% to 22.7% in reading. During the 1990s the trend altered, with 28.1% not meeting 8th grade math standards in 1996 and 26.9% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 22.0% in 1983 on the CTBS, 23.1% in 1990 on the Stanford, and 26.7% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 26.5% in 1990 and 21.7% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

3,500 students drop out	30.0% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 31.3% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 34.9% during 1985-89, and 34.0% during 1990-94. During the 1995-96 period, 95.1% of all who did graduate received the State High School Diploma, while 1.2% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 3.6% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 60 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 385 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 24.3% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 20.6% to 30.0%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 1,580 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 11.2% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

6.9%	White Males	19.1%	African-American & Other Males
11.3%	White Females	14.5%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 300 girls between the ages of 14 and 17 became pregnant in 1993 and 331 in 1994. In 1994, this represented 5.0% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 3.9% for Whites and 7.7% for African-Americans and others. Of all pregnancies to 14-17 year olds, 68.9% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 33.2%.

Alcohol Use: In 1992-93, 19.7% of 7th and 8th graders and 35.8% of high schoolers said they had used alcohol in the past month. Of White males, 31.4% had used it in the past month, compared with 31.9% of African-American males; likewise, 28.1% of White females said they had used alcohol, compared with 24.4% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 14.0% had used alcohol by age 11 or younger, 34.0% by age 13, and 57.2% by age 15.

During the previous year, 31.7% of 7th and 8th graders and 42.9% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 30.4% said they had driven after drinking, and 9.8% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 59.2% of eighth graders and 90.5% of seniors felt that beer was easy to get; 43.5% of eighth graders and 45.7% of seniors felt there was not a great risk in using it regularly.

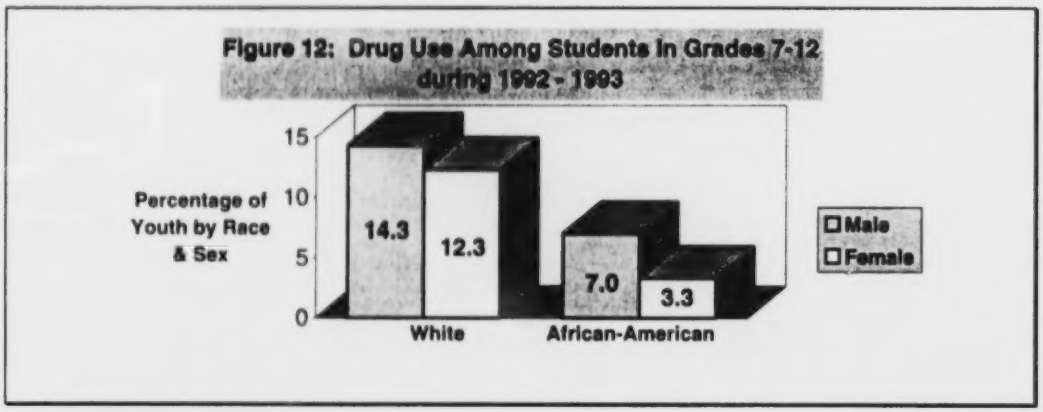
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 27.8% of all high school students in 1992-93 responded 3 or more drinks at a time; 16.7% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 6.1% of 7th and 8th graders and 14.7% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (14.3%) and White females (12.3%); use among African-American males was 7.0%; African-American females, 3.3%. Some young people first used drugs at an early age: among students 15 and older, 3.0% experienced their first use by age 11 or sooner; 8.8% had used a drug by age 13, and 18.5% by age 15.

Of seniors who had initiated use of marijuana, 7.6% had started use at home, 48.9% at a friend's home, and 43.5% elsewhere. During the past year, 4.5% of all high school students said that they used marijuana at home, 10.8% at a friend's house, and 7.2% in a car. In the past year, 7.8% of all high school students who drive and 13.8% of seniors who drive said that they had driven after using drugs . Furthermore, 9.1% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 29.6% of 8th graders who had an opinion said it is easy to get marijuana and 21.5% said it is easy to get cocaine or crack; 78.1% of seniors who had an opinion said it is easy to get marijuana and 60.9% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 23.8% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 1,058 individual juvenile offenders in the county were referred to the Solicitor; of these, 14.8% were age 12 or younger, 34.2% were 13 or 14, and 50.9% were 15 or older.

Of the referrals to the family court, 16.7% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 52 juvenile cases constituting 3.6% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

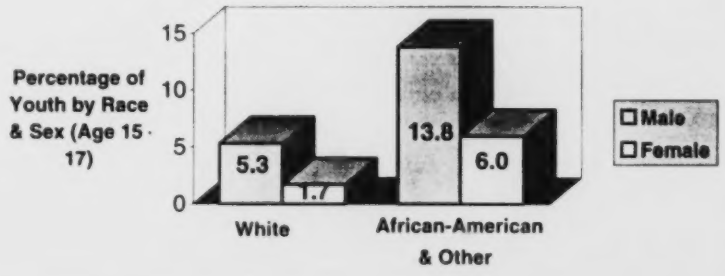
Delinquents are likely to live in families with low income: 42.5% lived in families with income under $10,000, 28.2% with $10,000-$19,999 and 29.4% with $20,000 or more. Furthermore, only 19.9% of delinquents lived with both natural parents, while 54.9% lived in a single parent household and 25.2% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 44.2% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 38.3% had at least one prior referral and 16.7% had been referred to court 3 times or more.

In 1994-95, there were 94 juvenile commitments from the county to State institutions.

During 1994-95, 538 youth ages 15 to 17 were referred to the family courts. In the county, 5.3% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.

Figure 13: Court Referrals



Deaths: During 1990-94, 88 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 38 deaths between 1990 and 1994; homicides killed 11 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 24.2% of children in single-parent families, 16.2% in poverty, 30.0% dropping out of school, 35.8% of high school students using alcohol and 23.8% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

Dr. A. Baron Holmes (803-734-2291) E-mail bholmes@ogc.state.sc.us

-or-

SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

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Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

SPARTANBURG

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	229	7.2	7.3	0.99	14	1994
Births to Mothers Not Completing High School	808	25.6	21.8	1.17	25	1994
Births to Single Mothers	990	31.3	30.4	1.03	15	1994
Children in Single-Parent Families	11,800	24.2	25.1	0.96	14	1990
Parents Working	18,407	75.6	74.3	1.02	25	1990
Abuse & Neglect Victims	672	1.1	1.0	1.10	28	1995-96
Separation from Parents	2,610	4.7	5.1	0.92	12	1990
Economic Status						
Poor Children	8,891	16.2	21.0	0.77	9	1989
Mean Income of Families with Children	$37,116	NA	NA	1.04	9	1989
Health						
Less than Adequate Prenatal Care	1,215	38.4	32.0	1.20	35	1994
Low Birth Weight	278	8.8	9.2	0.96	17	1994
Not Adequately Immunized	947	21.0	18.0	1.17	39	1995
Cigarette Smokers (High School)	1,975	24.3	23.1	1.05	33	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	655	19.3	28.1	0.69	1	1994-95
1st Grade Failures	NA	NA	6.8	0.00	NA	1994-95
Failures grades 1-3 (approx. %)	NA	NA	11.3	0.00	NA	1994-95
Overage for Grade 3	444	15.5	16.2	0.96	19	1995-96
Special Education (ages 8 and 9)	985	16.1	15.3	1.05	27	1995-96
School Achievement						
Special Education Grades 1 - 12	4,716	13.4	13.0	1.03	24	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	575	20.6	27.9	0.74	6	1995-96
Grade 8 BSAP - Math (Below standards)	828	28.1	34.8	0.81	8	1995-96
Grade 8 BSAP - Reading (Below standards)	789	26.9	28.8	0.93	14	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	680	23.7	29.5	0.80	6	1995-96
Exit Exam (Not passing all parts on 1st attempt)	734	29.2	35.3	0.83	8	1995-96
Dropout Rate	3,500	30.0	27.3	1.10	30	1992-95
25-34 Year olds with no HS Degree or GED	8,876	24.3	19.1	1.27	24	1990
Adolescent Risk Behavior						
Not in School or Employed	1,580	11.2	9.6	1.17	27	1990
Pregnancy (Ages 14 - 17)	331	5.0	4.8	1.04	17	1994
Alcohol Use (High School)	2,909	35.8	37.4	0.96	22	1992-93
Drug Use (High School)	1,195	14.7	12.8	1.15	41	1992-93
Binge Drinking (5 or more drinks)	1,357	16.7	16.3	1.02	28	1992-93
Delinquency (ages 15 - 17)	538	5.3	6.4	0.83	16	1994-95

* 1 = "best" 46 = "worst"

SPARTANBURG TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	227	6.8	1.03	1992	227	6.9	1.05	1993	229	7.2	0.99	1994
Births to Mothers Not Completing High School	977	29.1	1.23	1992	841	25.6	1.14	1993	808	25.6	1.17	1994
Births to Single Mothers	1,098	32.8	1.08	1992	1,006	30.7	1.01	1993	990	31.3	1.03	1994
Children in Single-Parent Families		12.8	0.88	1970		17.6	0.93	1980	11,800	24.2	0.96	1990
Economic Status												
Poor Children		20.5	0.71	1969		17.0	0.80	1979	8,891	16.2	0.77	1989
Mean Income of Families with Children					34,534	N/A	0.96	1979	37,116	N/A	0.96	1989
Health												
Less than Adequate Prenatal Care	1,521	45.4	1.15	1992	1,426	43.5	1.23	1993	1,215	38.4	1.20	1994
Low Birth Weight	303	9.0	1.00	1992	303	9.2	0.99	1993	278	8.8	0.96	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	567	17.6	0.66	1990-91	636	20.0	0.72	1992-93	655	19.3	0.69	1994-95
1st Grade Failures	268	8.5	0.94	1991-92	232	8.5	0.88	1992-93	NA	NA	NA	1994-95
Failures Grades 1-3 (approx. %)	368	12.0	0.85	1991-92	309	11.5	0.80	1992-93	NA	NA	NA	1994-95
Overage for Grade 3	739	26.3	1.02	1991-92	597	20.7	1.01	1993-94	444	15.5	0.96	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	407	14.9	0.77	1991-92	410	14.7	0.74	1993-94	575	20.6	0.74	1995-96*
Grade 8 BSAP - Math (Below Standards)	658	24.1	0.89	1991-92	675	23.1	0.75	1993-94	828	28.1	0.81	1995-96
Grade 8 BSAP - Reading (Below Standards)	658	24.1	0.99	1991-92	756	25.9	0.90	1993-94	789	26.9	0.93	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	433	16.2	0.74	1991-92	554	19.8	0.81	1993-94	680	23.7	0.80	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	564	25.9	0.83	1991-92	606	26.2	0.80	1993-94	734	29.2	0.83	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	311	4.7	1.00	1992	300	4.5	1.00	1993	331	5.0	1.04	1994
Alcohol Use (High School)	3,695	39.2	0.98	1989-90					2,909	35.8	0.96	1992-93
Drug Use (High School)	1,312	13.9	1.04	1989-90					1,195	14.7	1.15	1992-93
Binge Drinking (5 or more drinks)		15.6	1.00	1989-90					1,357	16.7	1.02	1992-93

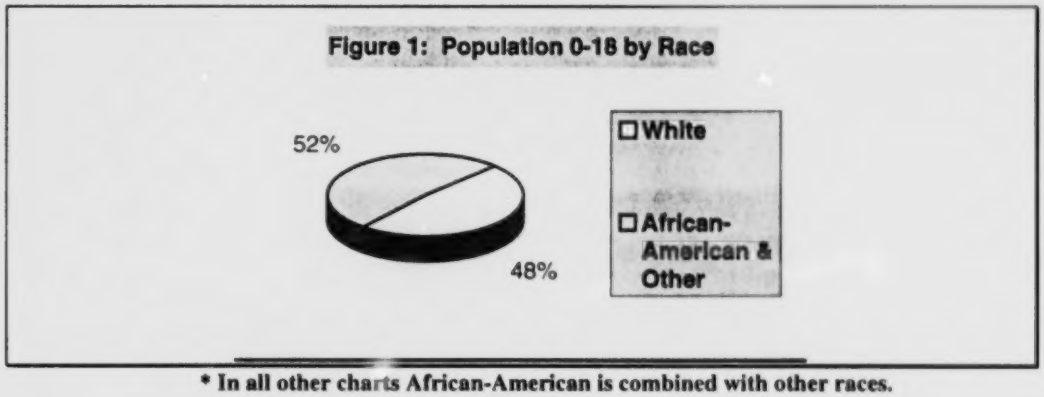
SOUTH CAROLINA kids count

1996 Report SUMTER

DEMOGRAPHICS

In 1994, there were 30,560 children under age 18 in the county. Of these, 14,740 were White and 15,820 were African-American and Other races. There were 29,360 children under age 18 in 1980, 32,562 in 1970, and 33,773 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 28.6% of the population in 1994, down from 45.1% in 1960, 41.0% in 1970 and 33.3% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 41.3% of all households in 1990, as compared with 54.0% of households in 1960, had children below the age of 18.

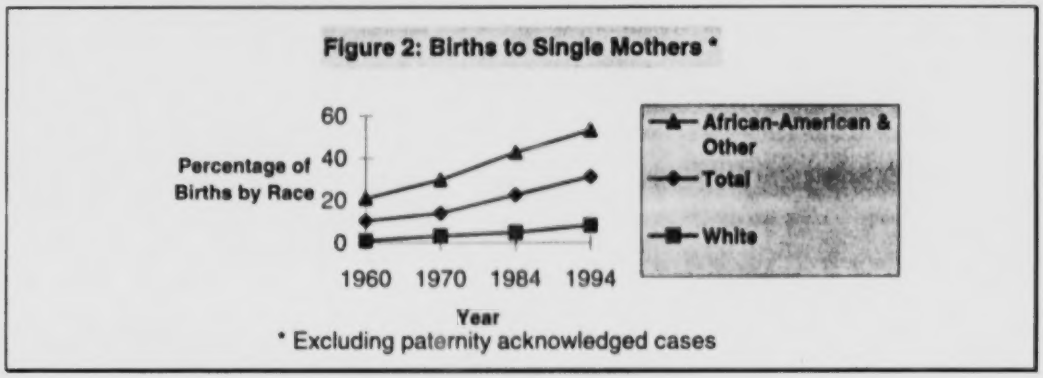
Births to Teen Mothers: In 1994, 116 babies were born to mothers younger than age 18. These babies were 6.9% of all children born in the county; 3.7% of all White babies and 10.1% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 78.4% were born to single mothers.

In 1994, 289 babies were born to mothers younger than age 20. These babies were 17.3% of all children born in the county; 12.1% of all White babies and 22.3% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 67.1% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 283 babies, 16.9% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 40.4% in 1970.

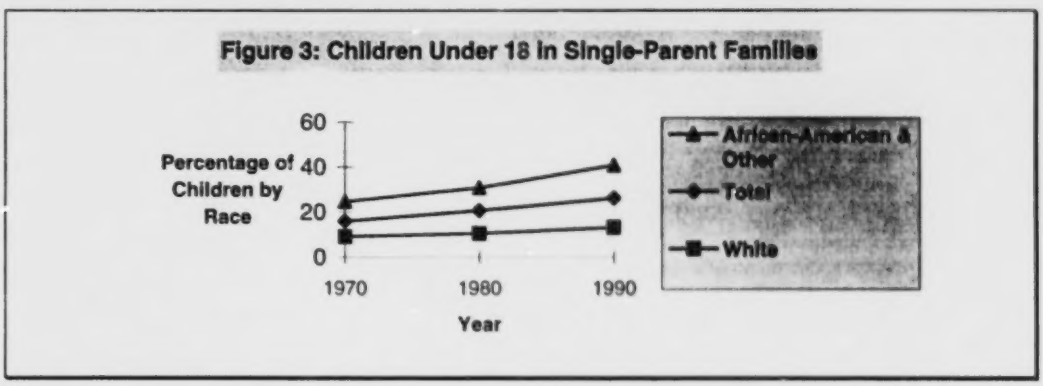
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 520 babies, 31.1% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 22.5% and in 1960 it was 10.3%. In 1994, 8.2% of White children and 53.2% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 76 babies, 4.6% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 596, constituting 35.7% of all babies, 11.4% of White babies, and 59.0% of African-American and Others.



Divorce Rate: In 1994, 985 marriage licenses were issued, while 479 divorce decrees involving 458 children were filed. In 1970 only 271 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 6,598 children lived with only one parent. This was 26.2% of all children, up from 20.6% in 1980 and 15.9% in 1970. In 1990, 13.2% of White children and 40.7% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 59.1% of mothers with children under 6 and 72.0% with children 6 - 17 were in the labor force. This has increased substantially from 27.2% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 1,810 children investigated as alleged child abuse and neglect victims: 25.2% for physical abuse, 12.2% for sexual abuse, 67.7% for neglect, and 43.6% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 459 children were victims of abuse and neglect: of these 43.1% were male and 56.9% were female; 32.9% were White, and 67.1% were African-American and Other. By age, 41.4% were 0 - 5, 38.8% were 6 - 12, and 19.8% were 13 - 17. They constituted 1.5% of all children age 18 or younger; 1.0% of all Whites and 1.9% of all African-Americans and Others. In the verified cases, 31.2% of abused and neglected children lived in two parent families, 53.4% in single parent families, 9.6% with extended families, and 5.9% in other circumstances.

Family Violence: In 1994, 879 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 37.0% of all assaults, which include both simple and aggravated assaults. Overall, 60.9% of all domestic assaults involve spouse abuse (constituting 22.4% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 4.7% of all children did not live with their natural parents; of these, 1,045 or 3.5% of children lived with relatives, 300 or 1.0% lived with non-relatives, and 28 were in institutional facilities.

Out of Home Placements: As of September 30, 1996, 172 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 12.2% 0-2, 18.0% 3-5, 27.3% 6-10, 15.7% 11-13, and 26.7% 14 and above. The foster care population is comprised of 40.1% males and 59.9% females. Regarding their future, 18.6% were under a plan for placement in adoptive homes, 53.5% for return to a parent or guardian, 4.7% for placement with a relative, 12.8% for independent living, 10.5% for permanent foster care, and 0.0% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.49 adults for every person below age 18. This was up substantially from 1960, when there were only 1.22 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 8,028 children and youth under the age of 18 lived in families with incomes below poverty. Over 27.5% of all children and youth lived below poverty: 12.0% of Whites and 42.6% of African-Americans and others.

Figure 4: Children Living in Poverty

Poverty has always been a serious problem. While the rate among children under age 18 was 27.5% in 1989, it was 29.3% in 1979 and 38.5% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 27.9% of children 0 - 5 and 27.3% of children 6 - 17 lived in poverty; 26.4% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 60.3% of children in single-parent families lived in poverty, but only 13.0% of children in married-couple families were poor. Children in single-parent families made up 66.7% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 10,470 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 2,442 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	29,179	8,028	10,470	12,871	15,370	16,360	17,668
Percent		27.5%	35.9%	44.1%	52.7%	56.1%	60.6%
White	14,370	1,721	2,920	3,931	5,199	5,708	6,473
Percent		12.0%	20.3%	27.4%	36.2%	39.7%	45.0%
African-American and Other	14,809	6,307	7,550	8,940	10,171	10,652	11,195
Percent		42.6%	51.0%	60.4%	68.7%	71.9%	75.6%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 13.4% of households did not have a car; 4.7% of Whites and 25.9% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 10.3% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 18.4% of households had no phone.

Income: The mean income of families with children in 1989 was $28,360; in 1979, it had been $27,055, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 7.3%.

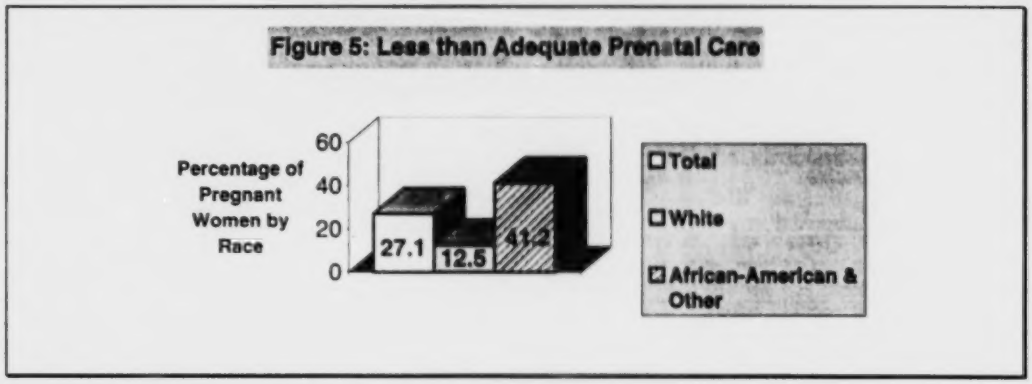
The mean income of single-parent families with children was $12,621 in 1989, as compared with $33,756 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 2,152 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only [illegible].9% had child support court orders. The average monthly payment of child support was $160.40, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 321 parents in non-AFDC families were obligated to pay a monthly average of $193.13. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 361 or 21.6% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 453 or 27.1% of pregnant women received less than adequate prenatal care: 102 or 12.5% of Whites and 351 or 41.2% of African-Americans and Others. In that same year, 10 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 147 or 8.8% of all babies in the county were born with low birthweight. Over 12.4% of African-American babies and 5.0% of White babies were born with low birthweight. During 1992-94, approximately 113 or 2.2% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 30.6%. For Whites, the rate decreased by 45.2%, while for African-Americans and Others, the rate decreased by 24.3%. Over the three-year period 1992-94, 16 White and 45 African-American and Other infants died before age one. By comparison, 31 White and 60 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 12 White and 13 African-American and Other children ages 1-14 died in the county. During 1982-84, 9 White and 12 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 56.1% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 18.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 1,087 to 1,631 youth ages 13-19 in the county were infected with a STD. In the county, there were 5 reported cases of children under age 15 and 132 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 11.5% first smoked by age 11, 24.2% by age 13, and 33.8% by age 15. In a typical month, 11.5% of 7th and 8th graders and 17.5% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 28.1% of White 7th to 12th graders used cigarettes, in comparison with 5.3% African-Americans. A smaller but significant group of high school students (5.4%) used smokeless tobacco monthly; it was used primarily by White males (21.9%) compared with 7.0% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 3,056 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 813 students in grades 1-12 with learning disabilities and 631 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 1,970 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 4,523 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 25 nurses; 9 are currently available.

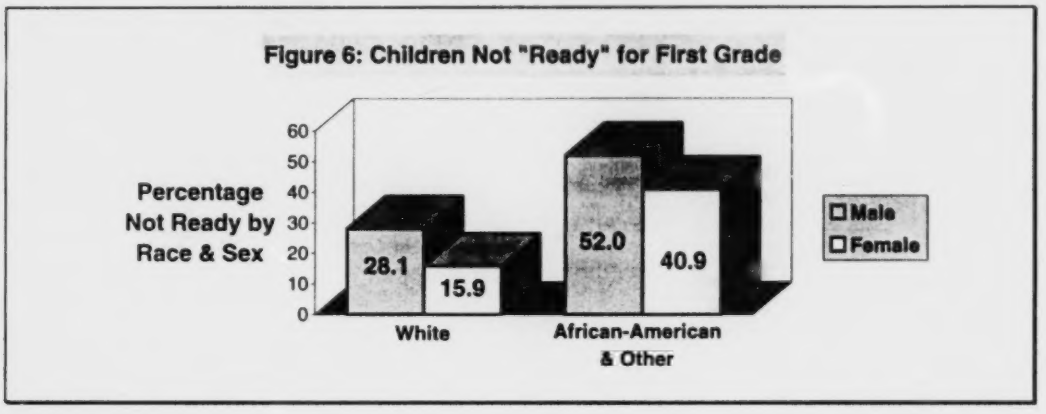
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 30.2% for Whites and 35.1% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

625 children not ready	**37.4% children not ready**

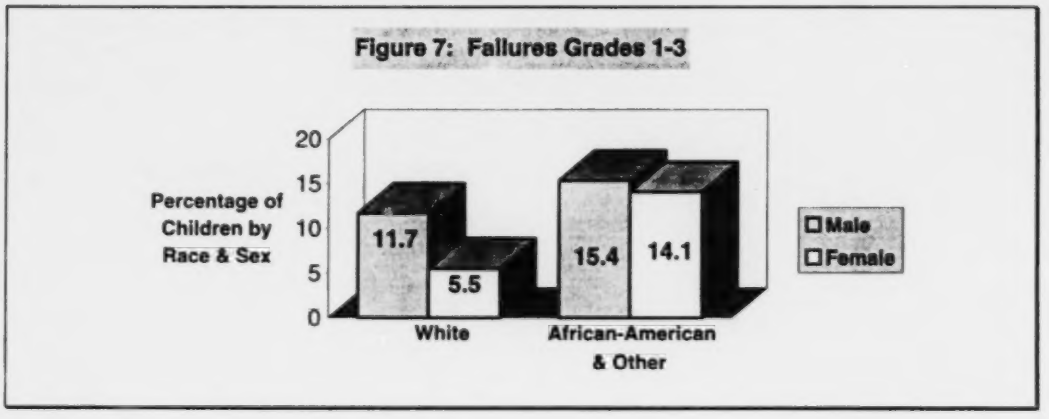


1st Grade Failures in 1995:

136 children failing	**8.1% children failing**

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

203 children failing	**12.4% children failing**



Overage for Grade 3 in 1996:

248 children overage	18.5% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 408 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 13.7% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 37.4% assessed not ready for the 1st grade, 18.5% overage in grade 3, and 13.7% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

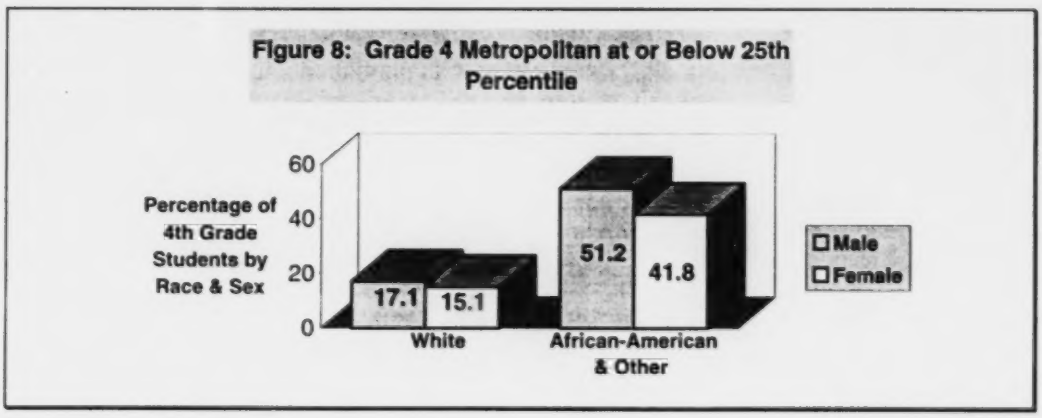
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 631 speech and language impaired, 813 learning disabled, 101 emotionally disabled, 635 mentally impaired, and 48 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 12.9% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

488 children at or below 25th percentile	33.9% children at or below 25th percentile



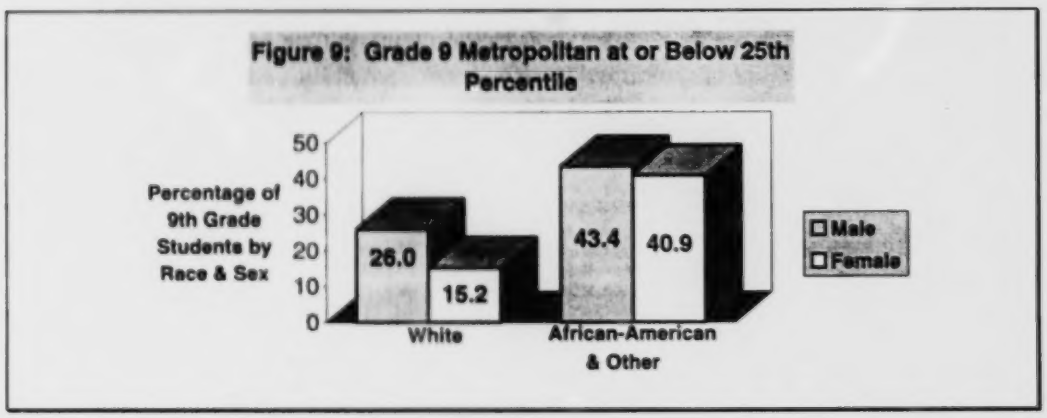
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	688	46.7	590	39.9
White Males	87	29.7	79	27.0
White Females	91	32.7	59	21.2
African-American & Other Males	264	59.6	248	56.2
African-American & Other Females	244	53.5	201	43.5

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

227 students at or below 25th percentile

33.8% students at or below 25th percentile

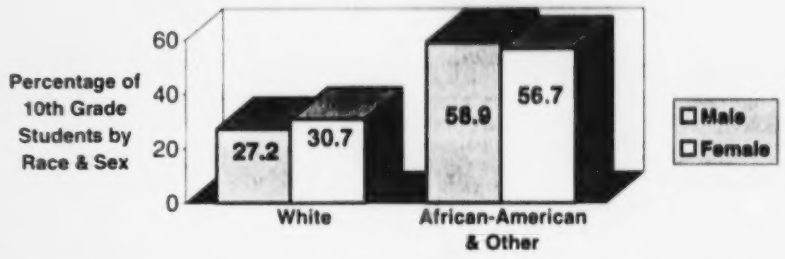


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

508 students not passing all parts

45.6% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



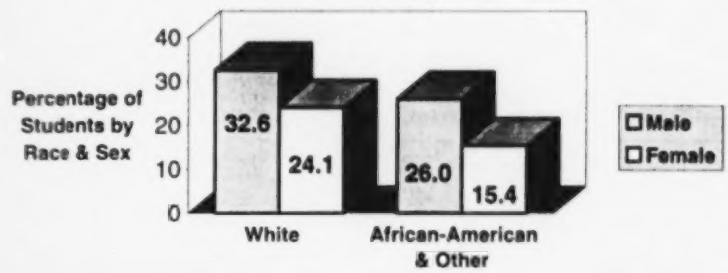
Achievement Trends: **How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 72.2% to 34.5% in math and from 56.8% to 29.1% in reading. During the 1990s the trend altered, with 46.7% not meeting 8th grade math standards in 1996 and 39.9% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 29.3% in 1983 on the CTBS, 37.3% in 1990 on the Stanford, and 37.6% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 32.7% in 1990 and 35.6% in 1995.**

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

1,292 students drop out

24.2% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 29.6% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 27.5% during 1985-89, and 30.5% during 1990-94. During the 1995-96 period, 92.1% of all who did graduate received the State High School Diploma, while 2.2% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 5.6% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 107 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 114 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 14.9% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 24.2% to 46.7%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 761 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 12.3% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

8.7%	White Males	14.1%	African-American & Other Males
15.8%	White Females	10.7%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 136 girls between the ages of 14 and 17 became pregnant in 1993 and 154 in 1994. In 1994, this represented 5.0% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 2.9% for Whites and 6.7% for African-Americans and others. Of all pregnancies to 14-17 year olds, 74.7% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 7.1%.

Alcohol Use: In 1992-93, 18.6% of 7th and 8th graders and 31.2% of high schoolers said they had used alcohol in the past month. Of White males, 32.5% had used it in the past month, compared with 27.6% of African-American males; likewise, 29.8% of White females said they had used alcohol, compared with 17.9% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 14.5% had used alcohol by age 11 or younger, 31.8% by age 13, and 52.1% by age 15.

During the previous year, 32.1% of 7th and 8th graders and 37.0% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 20.9% said they had driven after drinking, and 9.5% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 57.2% of eighth graders and 83.3% of seniors felt that beer was easy to get; 54.1% of eighth graders and 47.4% of seniors felt there was not a great risk in using it regularly.

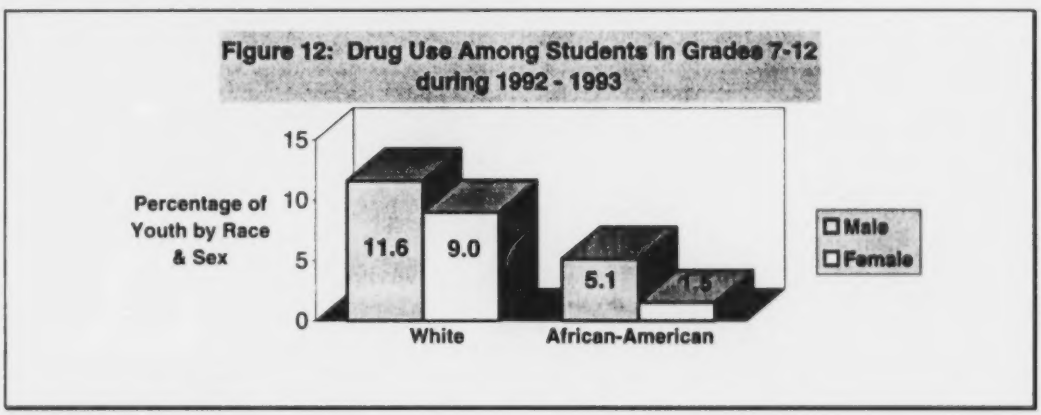
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 21.1% of all high school students in 1992-93 responded 3 or more drinks at a time; 11.5% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 3.6% of 7th and 8th graders and 8.0% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (11.6%) and White females (9.0%); use among African-American males was 5.1%; African-American females, 1.5%. Some young people first used drugs at an early age: among students 15 and older, 2.3% experienced their first use by age 11 or sooner; 5.8% had used a drug by age 13, and 11.4% by age 15.

Of seniors who had initiated use of marijuana, 6.2% had started use at home, 40.7% at a friend's home, and 53.1% elsewhere. During the past year, 1.9% of all high school students said that they used marijuana at home, 4.6% at a friend's house, and 3.4% in a car. In the past year, 3.6% of all high school students who drive and 5.5% of seniors who drive said that they had driven after using drugs . Furthermore, 3.9% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 26.6% of 8th graders who had an opinion said it is easy to get marijuana and 24.7% said it is easy to get cocaine or crack; 68.2% of seniors who had an opinion said it is easy to get marijuana and 61.6% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 13.0% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 640 individual juvenile offenders in the county were referred to the Solicitor; of these, 15.3% were age 12 or younger, 31.4% were 13 or 14, and 53.3% were 15 or older.

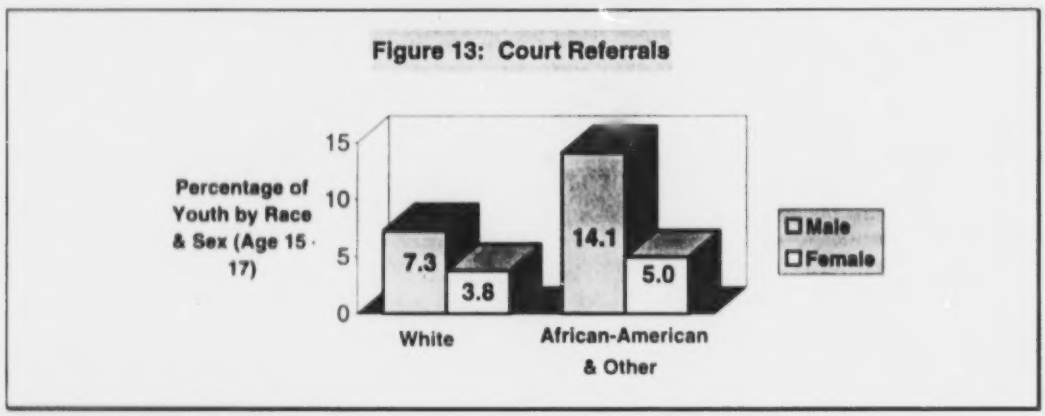
Of the referrals to the family court, 14.4% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 214 juvenile cases constituting 24.6% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 46.2% lived in families with income under $10,000, 28.4% with $10,000-$19,999 and 25.4% with $20,000 or more. Furthermore, only 25.8% of delinquents lived with both natural parents, while 47.8% lived in a single parent household and 26.4% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 34.5% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 35.2% had at least one prior referral and 14.8% had been referred to court 3 times or more.

In 1994-95, there were 21 juvenile commitments from the county to State institutions.

During 1994-95, 341 youth ages 15 to 17 were referred to the family courts. In the county, 7.5% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 28 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 12 deaths between 1990 and 1994; homicides killed 9 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 26.2% of children in single-parent families, 27.5% in poverty, 24.2% dropping out of school, 31.2% of high school students using alcohol and 13.0% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

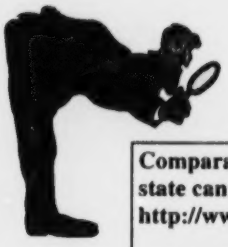
This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

Dr. A. Baron Holmes (803-734-2291) E-mail bholmes@ogc.state.sc.us
-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.



Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

SUMTER

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	116	6.9	7.3	0.95	10	1994
Births to Mothers Not Completing High School	283	16.9	21.8	0.78	6	1994
Births to Single Mothers	520	31.1	30.4	1.02	14	1994
Children in Single-Parent Families	6,598	26.2	25.1	1.04	22	1990
Parents Working	7,634	67.3	74.3	0.91	3	1990
Abuse & Neglect Victims	459	1.5	1.0	1.50	37	1995-96
Separation from Parents	1,373	4.7	5.1	0.92	12	1990
Economic Status						
Poor Children	8,028	27.5	21.0	1.31	30	1989
Mean Income of Families with Children	$28,360	NA	NA	0.80	37	1989
Health						
Less than Adequate Prenatal Care	453	27.1	32.0	0.85	10	1994
Low Birth Weight	147	8.8	9.2	0.96	17	1994
Not Adequately Immunized	418	18.0	18.0	1.00	35	1995
Cigarette Smokers (High School)	762	17.5	23.1	0.76	14	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	625	37.4	28.1	1.33	42	1994-95
1st Grade Failures	136	8.1	6.8	1.19	27	1994-95
Failures grades 1-3 (approx. %)	203	12.4	11.3	1.10	22	1994-95
Overage for Grade 3	248	18.5	16.2	1.14	30	1995-96
Special Education (ages 8 and 9)	408	13.7	15.3	0.90	17	1995-96
School Achievement						
Special Education Grades 1 - 12	2,228	12.9	13.0	0.99	18	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	488	33.9	27.9	1.22	28	1995-96
Grade 8 BSAP - Math (Below standards)	688	46.7	34.8	1.34	38	1995-96
Grade 8 BSAP - Reading (Below standards)	590	39.9	28.8	1.39	35	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	227	33.8	29.5	1.15	26	1995-96
Exit Exam (Not passing all parts on 1st attempt)	508	45.6	35.3	1.29	31	1995-96
Dropout Rate	1,292	24.2	27.3	0.89	12	1992-95
25-34 Year olds with no HS Degree or GED	3,013	14.9	19.1	0.78	5	1990
Adolescent Risk Behavior						
Not in School or Employed	761	12.3	9.6	1.28	35	1990
Pregnancy (Ages 14 - 17)	154	5.0	4.8	1.04	17	1994
Alcohol Use (High School)	1,358	31.2	37.4	0.83	6	1992-93
Drug Use (High School)	348	8.0	12.8	0.63	18	1992-93
Binge Drinking (5 or more drinks)	500	11.5	16.3	0.71	7	1992-93
Delinquency (ages 15 - 17)	341	7.5	6.4	1.17	33	1994-95

* 1 = "best" 46 = "worst"

SUMTER TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	107	6.0	0.91	1992	111	6.7	1.02	1993	116	6.9	0.95	1994
Births to Mothers Not Completing High School	350	19.8	0.84	1992	315	19.0	0.85	1993	283	16.9	0.78	1994
Births to Single Mothers	559	31.5	1.04	1992	534	32.2	1.06	1993	520	31.1	1.02	1994
Children in Single-Parent Families		15.9	1.10	1970		20.6	1.09	1980	6,598	26.2	1.04	1990
Economic Status												
Poor Children		38.5	1.34	1969		29.3	1.38	1979	8,028	27.5	1.31	1989
Mean Income of Families with Children					27,055	N/A	1.22	1979	28,360	N/A	1.25	1989
Health												
Less than Adequate Prenatal Care	642	36.2	0.92	1992	588	35.5	1.01	1993	453	27.1	0.85	1994
Low Birth Weight	155	8.7	0.97	1992	149	9.0	0.97	1993	147	8.8	0.96	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	571	33.4	1.26	1990-91	551	33.7	1.21	1992-93	625	37.4	1.33	1994-95
1st Grade Failures	99	5.9	0.66	1991-92	105	7.5	0.77	1992-93	136	8.1	1.19	1994-95
Failures Grades 1-3 (approx. %)	171	10.7	0.76	1991-92	181	13.5	0.94	1992-93	203	12.4	1.10	1994-95
Overage for Grade 3	316	20.7	0.80	1991-92	325	21.1	1.03	1993-94	248	18.5	1.14	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	430	28.0	1.45	1991-92	374	26.6	1.34	1993-94	488	33.9	1.22	1995-96*
Grade 8 BSAP - Math (Below Standards)	484	36.7	1.36	1991-92	552	41.3	1.34	1993-94	688	46.7	1.34	1995-96
Grade 8 BSAP - Reading (Below Standards)	481	36.7	1.50	1991-92	508	38.1	1.32	1993-94	590	39.9	1.39	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	343	25.2	1.15	1991-92	461	31.1	1.28	1993-94	227	33.8	1.15	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	371	36.3	1.17	1991-92	422	36.8	1.13	1993-94	508	45.6	1.29	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	136	4.5	0.96	1992	136	4.4	0.98	1993	154	5.0	1.04	1994
Alcohol Use (High School)	1,427	34.0	0.85	1989-90					1,358	31.2	0.83	1992-93
Drug Use (High School)	417	9.9	0.74	1989-90					348	8.0	0.63	1992-93
Binge Drinking (5 or more drinks)		10.9	0.70	1989-90					500	11.5	0.71	1992-93

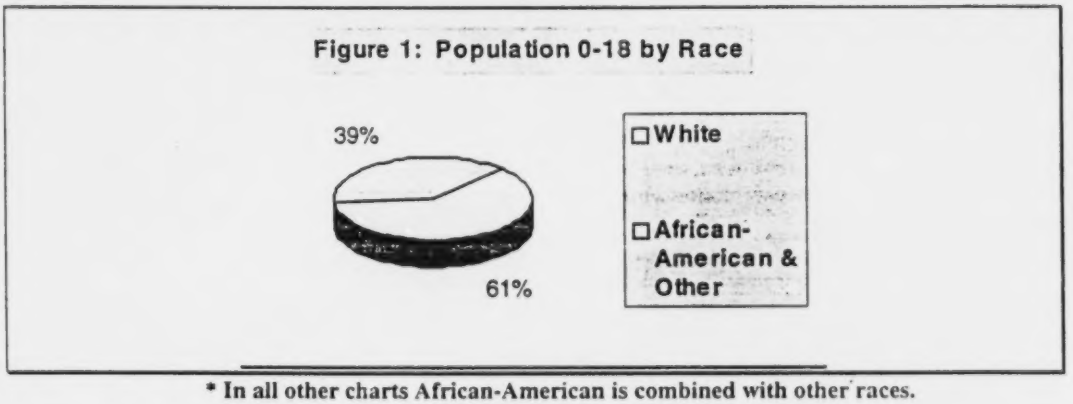
SOUTH CAROLINA kids count

1996 Report UNION

DEMOGRAPHICS

In 1994, there were 7,570 children under age 18 in the county. Of these, 4,610 were White and 2,960 were African-American and Other races. There were 8,863 children under age 18 in 1980, 10,235 in 1970, and 11,765 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 24.7% of the population in 1994, down from 39.2% in 1960, 35.0% in 1970 and 28.8% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 32.7% of all households in 1990, as compared with 44.0% of households in 1960, had children below the age of 18.

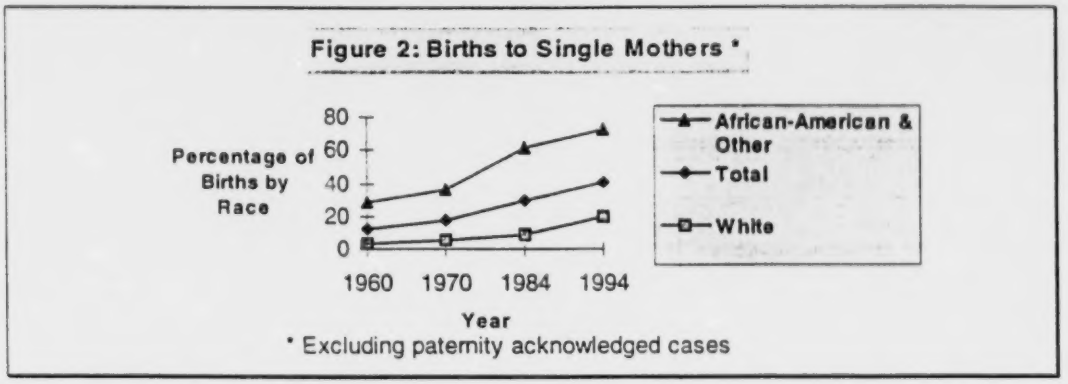
Births to Teen Mothers: In 1994, 45 babies were born to mothers younger than age 18. These babies were 11.4% of all children born in the county; 9.5% of all White babies and 14.3% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 82.2% were born to single mothers.

In 1994, 99 babies were born to mothers younger than age 20. These babies were 25.0% of all children born in the county; 21.9% of all White babies and 29.9% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 68.7% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 116 babies, 29.3% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 52.1% in 1970.

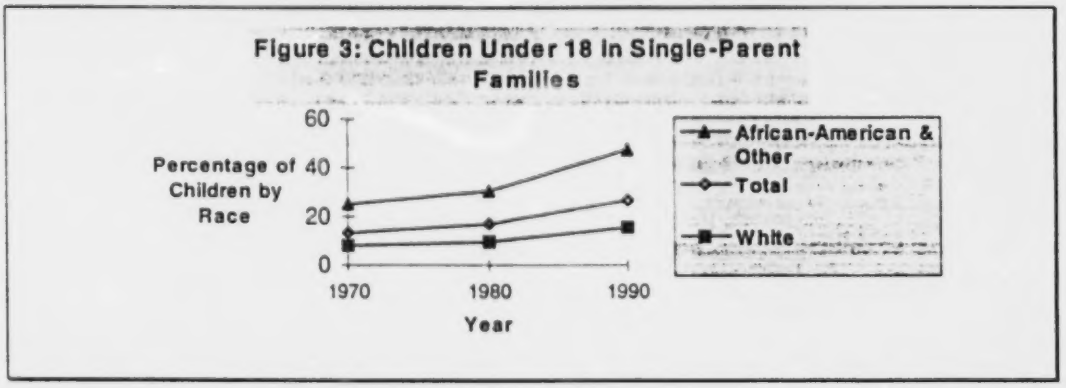
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 161 babies, 40.7% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 30.1% and in 1960 it was 12.1%. In 1994, 20.2% of White children and 72.7% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 16 babies, 4.0% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 177, constituting 44.7% of all babies, 25.2% of White babies, and 75.3% of African-American and Others.



Divorce Rate: In 1994, 257 marriage licenses were issued, while 140 divorce decrees involving 126 children were filed. In 1970 only 78 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 1,711 children lived with only one parent. This was 26.9% of all children, up from 17.1% in 1980 and 13.4% in 1970. In 1990, 15.4% of White children and 47.1% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 72.6% of mothers with children under 6 and 80.2% with children 6 - 17 were in the labor force. This has increased substantially from 50.1% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

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Abuse and Neglect: In 1995-96, there were 202 children investigated as alleged child abuse and neglect victims: 27.2% for physical abuse, 8.4% for sexual abuse, 65.3% for neglect, and 24.3% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 70 children were victims of abuse and neglect: of these 48.6% were male and 51.4% were female; 71.4% were White, and 28.6% were African-American and Other. By age, 37.1% were 0 - 5, 45.7% were 6 - 12, and 17.1% were 13 - 17. They constituted 0.9% of all children age 18 or younger; 1.1% of all Whites and 0.7% of all African-Americans and Others. In the verified cases, 31.4% of abused and neglected children lived in two parent families, 37.1% in single parent families, 7.1% with extended families, and 24.3% in other circumstances.

Family Violence: In 1994, 133 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 29.0% of all assaults, which include both simple and aggravated assaults. Overall, 63.2% of all domestic assaults involve spouse abuse (constituting 18.1% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 5.4% of all children did not live with their natural parents; of these, 277 or 3.7% of children lived with relatives, 120 or 1.6% lived with non-relatives, and 7 were in institutional facilities.

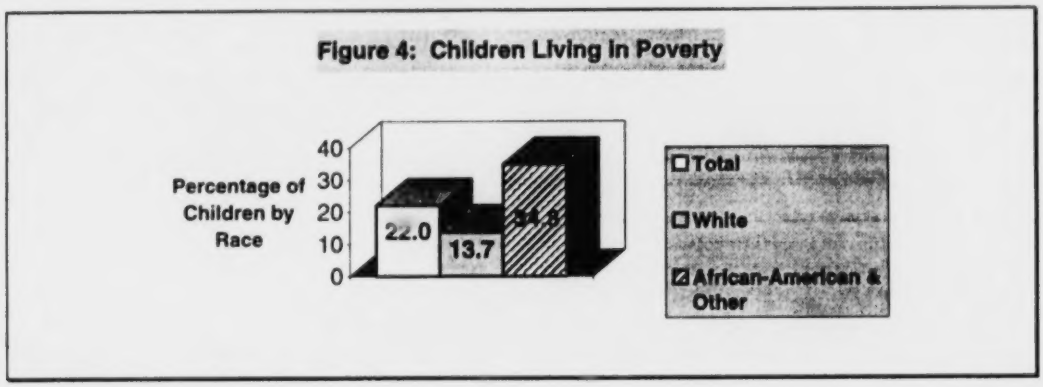
Out of Home Placements: As of September 30, 1996, 11 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 9.1% 0-2, 0.0% 3-5, 63.6% 6-10, 0.0% 11-13, and 27.3% 14 and above. The foster care population is comprised of 72.7% males and 27.3% females. Regarding their future, 0.0% were under a plan for placement in adoptive homes, 27.3% for return to a parent or guardian, 54.5% for placement with a relative, 0.0% for independent living, 18.2% for permanent foster care, and 0.0% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 3.04 adults for every person below age 18. This was up substantially from 1960, when there were only 1.55 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 1,641 children and youth under the age of 18 lived in families with incomes below poverty. Over 22.0% of all children and youth lived below poverty: 13.7% of Whites and 34.8% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 22.0% in 1989, it was 12.9% in 1979 and 19.5% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 23.1% of children 0 - 5 and 21.5% of children 6 - 17 lived in poverty; 25.8% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 52.4% of children in single-parent families lived in poverty, but only 8.8% of children in married-couple families were poor. Children in single-parent families made up 67.6% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 2,169 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 528 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	7,472	1,641	2,169	2,622	3,222	3,429	3,687
Percent		22.0%	29.0%	35.1%	43.1%	45.9%	49.3%
White	4,555	626	880	1,095	1,393	1,503	1,689
Percent		13.7%	19.3%	24.0%	30.6%	33.0%	37.1%
African-American and Other	2,917	1,015	1,289	1,527	1,829	1,926	1,998
Percent		34.8%	44.2%	52.3%	62.7%	66.0%	68.5%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 14.2% of households did not have a car; 8.9% of Whites and 28.9% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 12.5% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 31.0% of households had no phone.

Income: The mean income of families with children in 1989 was $28,823; in 1979, it had been $30,538, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 8.6%.

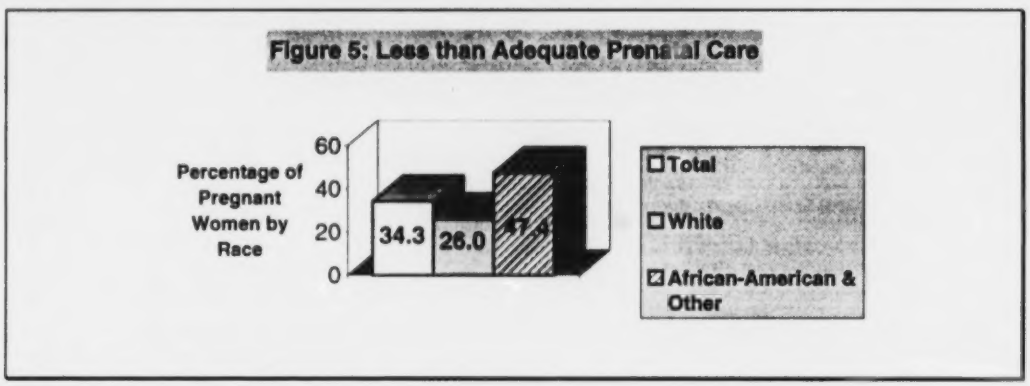
The mean income of single-parent families with children was $12,883 in 1989, as compared with $34,865 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 343 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 54.2% had child support court orders. The average monthly payment of child support was $148.05, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 391 parents in non-AFDC families were obligated to pay a monthly average of $168.63. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 94 or 23.7% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 136 or 34.3% of pregnant women received less than adequate prenatal care: 63 or 26.0% of Whites and 73 or 47.4% of African-Americans and Others. In that same year, 6 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 32 or 8.1% of all babies in the county were born with low birthweight. Over 14.3% of African-American babies and 4.1% of White babies were born with low birthweight. During 1992-94, approximately 23 or 1.9% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 50.5%. For Whites, the rate decreased by 58.8%, while for African-Americans and Others, the rate decreased by 47.5%. Over the three-year period 1992-94, 4 White and 9 African-American and Other infants died before age one. By comparison, 10 White and 16 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 2 White and 0 African-American and Other children ages 1-14 died in the county. During 1982-84, 4 White and 2 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 56.6% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 21.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 310 to 465 youth ages 13-19 in the county were infected with a STD. In the county, there were 4 reported cases of children under age 15 and 34 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 16.0% first smoked by age 11, 34.7% by age 13, and 45.5% by age 15. In a typical month, 14.2% of 7th and 8th graders and 25.1% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 29.2% of White 7th to 12th graders used cigarettes, in comparison with 8.5% African-Americans. A smaller but significant group of high school students (9.2%) used smokeless tobacco monthly; it was used primarily by White males (29.5%) compared with 8.0% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 757 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 309 students in grades 1-12 with learning disabilities and 136 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 520 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 1,120 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 7 nurses; 2 are currently available.

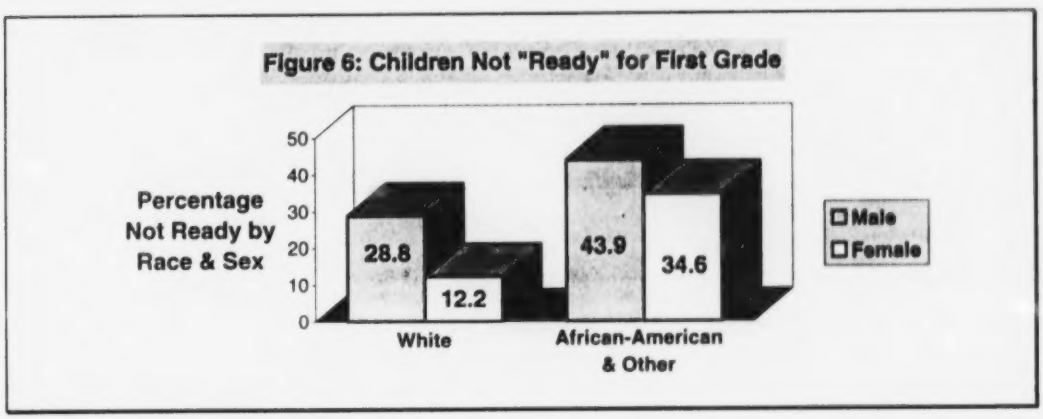
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 39.6% for Whites and 31.6% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

136 children not ready — **28.8% children not ready**

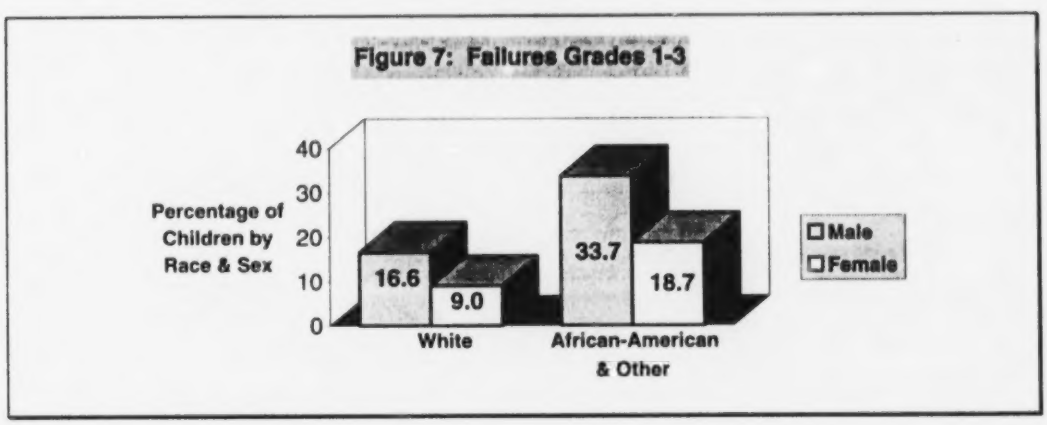


1st Grade Failures in 1995:

44 children failing — **9.6% children failing**

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

82 children failing — **18.3% children failing**



Overage for Grade 3 in 1996:

78 children overage	18.3% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 115 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 13.3% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 28.8% assessed not ready for the 1st grade, 18.3% overage in grade 3, and 13.3% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

SCHOOL ACHIEVEMENT

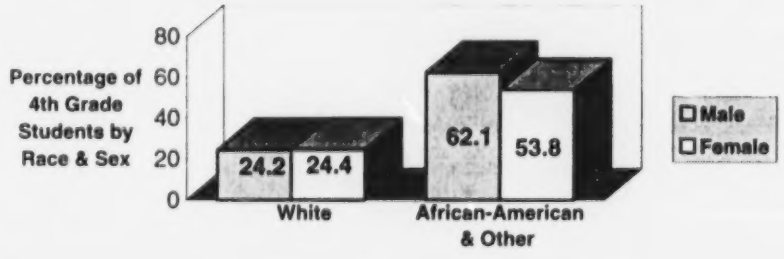
By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 136 speech and language impaired, 309 learning disabled, 1 emotionally disabled, 174 mentally impaired, and 30 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 13.9% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

132 children at or below 25th percentile	37.5% children at or below 25th percentile

Figure 8: Grade 4 Metropolitan at or Below 25th Percentile



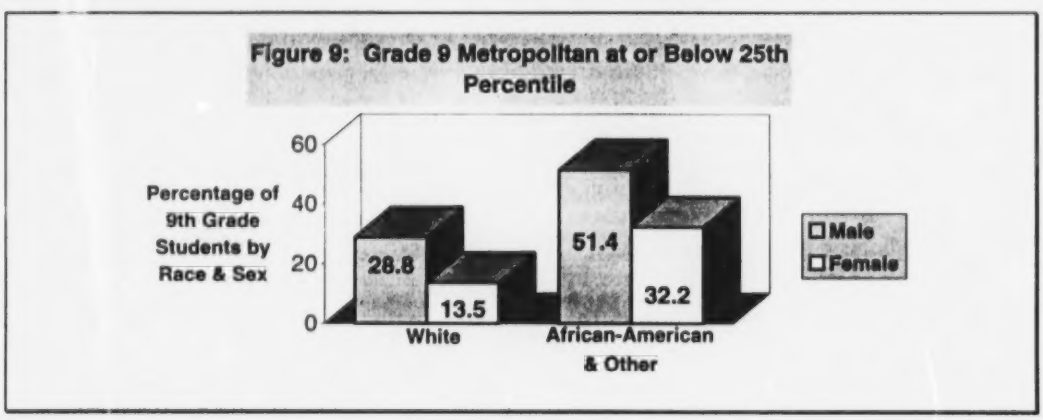
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	92	24.9	92	24.9
White Males	18	16.5	20	18.0
White Females	18	17.0	16	15.2
African-American & Other Males	32	43.2	37	50.0
African-American & Other Females	24	30.0	19	24.1

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

120 students at or below 25th percentile

29.9% students at or below 25th percentile

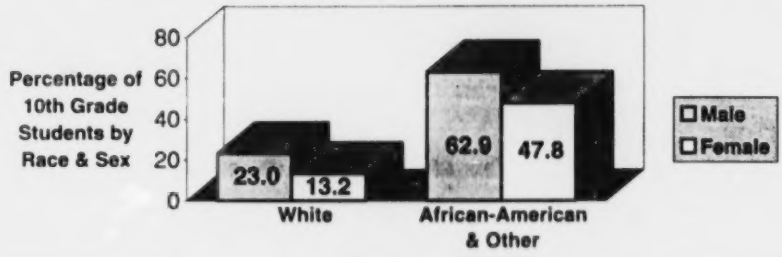


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

108 students not passing all parts

32.2% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



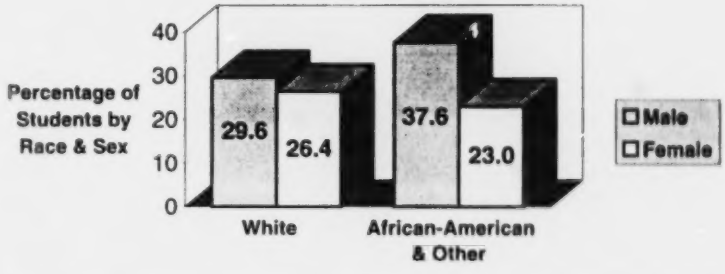
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 47.1% to 17.0% in math and from 54.4% to 18.5% in reading. During the 1990s the trend altered, with 24.9% not meeting 8th grade math standards in 1996 and 24.9% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 27.3% in 1983 on the CTBS, 36.9% in 1990 on the Stanford, and 30.8% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 38.4% in 1990 and 28.9% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

498 students drop out

29.0% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 37.9% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 29.5% during 1985-89, and 28.2% during 1990-94. During the 1995-96 period, 89.9% of all who did graduate received the State High School Diploma, while 1.9% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 8.2% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 121 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 32 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 30.3% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 24.9% to 37.5%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 202 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 10.8% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

4.1%	White Males	10.6%	African-American & Other Males
17.5%	White Females	9.4%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 54 girls between the ages of 14 and 17 became pregnant in 1993 and 55 in 1994. In 1994, this represented 6.3% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 4.7% for Whites and 8.8% for African-Americans and others. Of all pregnancies to 14-17 year olds, 81.8% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it increased by 6.3%.

Alcohol Use: In 1992-93, 15.4% of 7th and 8th graders and 40.3% of high schoolers said they had used alcohol in the past month. Of White males, 34.9% had used it in the past month, compared with 30.5% of African-American males; likewise, 28.7% of White females said they had used alcohol, compared with 29.5% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 14.3% had used alcohol by age 11 or younger, 33.7% by age 13, and 60.7% by age 15.

During the previous year, 28.7% of 7th and 8th graders and 47.2% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 26.0% said they had driven after drinking, and 12.3% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 47.6% of eighth graders and 86.0% of seniors felt that beer was easy to get; 40.7% of eighth graders and 44.5% of seniors felt there was not a great risk in using it regularly.

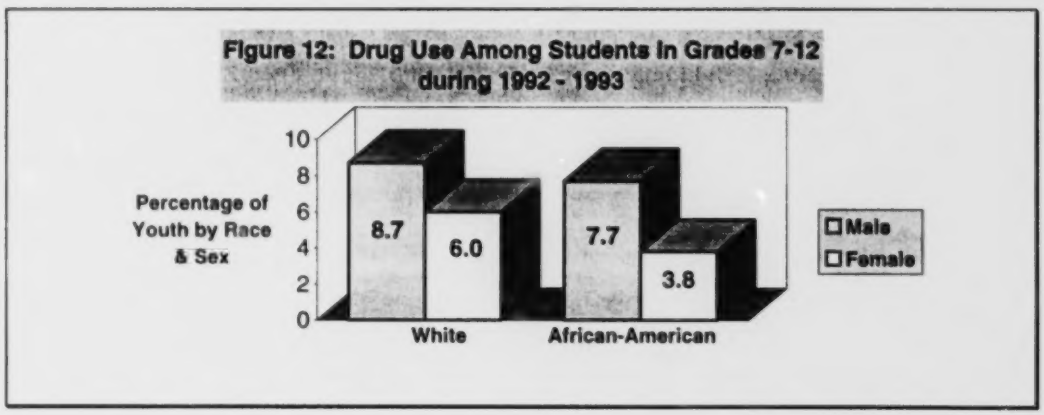
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 30.9% of all high school students in 1992-93 responded 3 or more drinks at a time; 18.1% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 3.1% of 7th and 8th graders and 8.8% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (8.7%) and White females (6.0%); use among African-American males was 7.7%; African-American females, 3.8%. Some young people first used drugs at an early age: among students 15 and older, 2.4% experienced their first use by age 11 or sooner; 6.4% had used a drug by age 13, and 13.4% by age 15.

Of seniors who had initiated use of marijuana, 22.7% had started use at home, 34.0% at a friend's home, and 43.3% elsewhere. During the past year, 2.0% of all high school students said that they used marijuana at home, 5.7% at a friend's house, and 3.7% in a car. In the past year, 3.5% of all high school students who drive and 4.0% of seniors who drive said that they had driven after using drugs . Furthermore, 2.4% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 14.6% of 8th graders who had an opinion said it is easy to get marijuana and 11.6% said it is easy to get cocaine or crack; 68.1% of seniors who had an opinion said it is easy to get marijuana and 45.4% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 14.3% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 197 individual juvenile offenders in the county were referred to the Solicitor; of these, 10.7% were age 12 or younger, 32.0% were 13 or 14, and 57.4% were 15 or older.

Of the referrals to the family court, 8.7% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 38 juvenile cases constituting 12.7% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

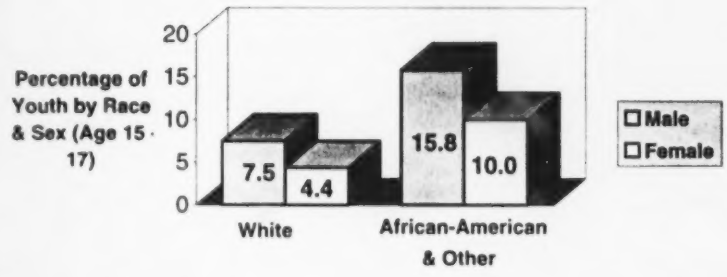
Delinquents are likely to live in families with low income: 36.5% lived in families with income under $10,000, 43.3% with $10,000-$19,999 and 20.2% with $20,000 or more. Furthermore, only 16.1% of delinquents lived with both natural parents, while 60.0% lived in a single parent household and 23.9% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 35.4% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 46.2% had at least one prior referral and 22.3% had been referred to court 3 times or more.

In 1994-95, there were 8 juvenile commitments from the county to State institutions.

During 1994-95, 113 youth ages 15 to 17 were referred to the family courts. In the county, 8.6% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.

Figure 13: Court Referrals



Deaths: During 1990-94, 17 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 10 deaths between 1990 and 1994; homicides killed 2 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 26.9% of children in single-parent families, 22.0% in poverty, 29.0% dropping out of school, 40.3% of high school students using alcohol and 14.3% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

Dr. A. Baron Holmes (803-734-2291) E-mail bholmes@ogc.state.sc.us
-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

UNION

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	45	11.4	7.3	1.56	40	1994
Births to Mothers Not Completing High School	116	29.3	21.8	1.34	39	1994
Births to Single Mothers	161	40.7	30.4	1.34	29	1994
Children in Single-Parent Families	1,711	26.9	25.1	1.07	24	1990
Parents Working	2,632	77.9	74.3	1.05	37	1990
Abuse & Neglect Victims	70	0.9	1.0	0.90	16	1995-96
Separation from Parents	404	5.4	5.1	1.06	18	1990
Economic Status						
Poor Children	1,641	22.0	21.0	1.05	20	1989
Mean Income of Families with Children	$28,823	NA	NA	0.81	34	1989
Health						
Less than Adequate Prenatal Care	136	34.3	32.0	1.07	27	1994
Low Birth Weight	32	8.1	9.2	0.88	9	1994
Not Adequately Immunized	134	21.0	18.0	1.17	39	1995
Cigarette Smokers (High School)	345	25.1	23.1	1.09	34	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	136	28.8	28.1	1.02	25	1994-95
1st Grade Failures	44	9.6	6.8	1.41	31	1994-95
Failures grades 1-3 (approx. %)	82	18.3	11.3	1.62	35	1994-95
Overage for Grade 3	78	18.3	16.2	1.13	29	1995-96
Special Education (ages 8 and 9)	115	13.3	15.3	0.87	14	1995-96
School Achievement						
Special Education Grades 1 - 12	650	13.9	13.0	1.07	27	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	132	37.5	27.9	1.34	36	1995-96
Grade 8 BSAP - Math (Below standards)	92	24.9	34.8	0.72	4	1995-96
Grade 8 BSAP - Reading (Below standards)	92	24.9	28.8	0.86	11	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	120	29.9	29.5	1.01	17	1995-96
Exit Exam (Not passing all parts on 1st attempt)	108	32.2	35.3	0.91	12	1995-96
Dropout Rate	498	29.0	27.3	1.06	26	1992-95
25-34 Year olds with no HS Degree or GED	1,378	30.3	19.1	1.59	42	1990
Adolescent Risk Behavior						
Not in School or Employed	202	10.8	9.6	1.13	24	1990
Pregnancy (Ages 14 - 17)	55	6.3	4.8	1.31	36	1994
Alcohol Use (High School)	554	40.3	37.4	1.08	37	1992-93
Drug Use (High School)	121	8.8	12.8	0.69	22	1992-93
Binge Drinking (5 or more drinks)	249	18.1	16.3	1.11	35	1992-93
Delinquency (ages 15 - 17)	113	8.6	6.4	1.34	39	1994-95

* 1 = "best" 46 = "worst"

UNION TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	30	7.5	1.14	1992	38	9.7	1.47	1993	45	11.4	1.56	1994
Births to Mothers Not Completing High School	104	26.1	1.11	1992	122	31.3	1.40	1993	116	29.3	1.34	1994
Births to Single Mothers	161	40.5	1.34	1992	139	35.6	1.17	1993	161	40.7	1.34	1994
Children in Single-Parent Families		13.4	0.92	1970		17.1	0.90	1980	1,711	26.9	1.07	1990
Economic Status												
Poor Children		19.5	0.68	1969		12.9	0.61	1979	1,641	22.0	1.05	1989
Mean Income of Families with Children					30,538	N/A	1.08	1979	28,823	N/A	1.23	1989
Health												
Less than Adequate Prenatal Care	160	40.2	1.02	1992	143	36.7	1.04	1993	136	34.3	1.07	1994
Low Birth Weight	37	9.3	1.03	1992	39	10.0	1.08	1993	32	8.1	0.88	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	97	21.3	0.80	1990-91	157	33.4	1.20	1992-93	136	28.8	1.02	1994-95
1st Grade Failures	53	12.0	1.33	1991-92	45	10.8	1.11	1992-93	44	9.6	1.41	1994-95
Failures Grades 1-3 (approx. %)	76	18.0	1.28	1991-92	63	15.8	1.10	1992-93	82	18.3	1.62	1994-95
Overage for Grade 3	119	31.5	1.22	1991-92	91	23.5	1.15	1993-94	78	18.3	1.13	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	58	13.9	0.72	1991-92	71	19.5	0.98	1993-94	132	37.5	1.34	1995-96*
Grade 8 BSAP - Math (Below Standards)	65	16.2	0.60	1991-92	72	18.8	0.61	1993-94	92	24.9	0.72	1995-96
Grade 8 BSAP - Reading (Below Standards)	86	21.4	0.88	1991-92	121	31.3	1.09	1993-94	92	24.9	0.86	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	95	23.2	1.06	1991-92	80	21.2	0.87	1993-94	120	29.9	1.01	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	135	35.9	1.15	1991-92	126	36.0	1.10	1993-94	108	32.2	0.91	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	43	4.9	1.04	1992	54	6.2	1.38	1993	55	6.3	1.31	1994
Alcohol Use (High School)	554	38.1	0.95	1989-90					554	40.3	1.08	1992-93
Drug Use (High School)	173	11.9	0.89	1989-90					121	8.8	0.69	1992-93
Binge Drinking (5 or more drinks)		17.0	1.09	1989-90					249	18.1	1.11	1992-93

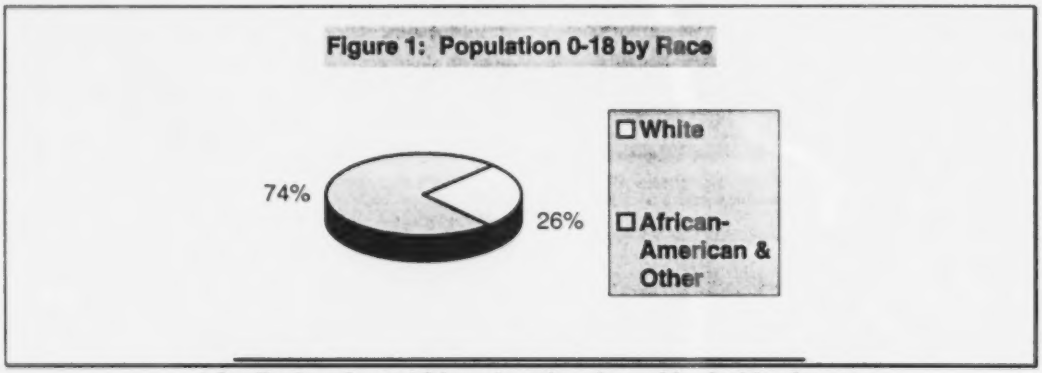
SOUTH CAROLINA kids count

1996 Report WILLIAMSBURG

DEMOGRAPHICS

In 1994, there were 12,030 children under age 18 in the county. Of these, 3,110 were White and 8,910 were African-American and Other races. There were 13,765 children under age 18 in 1980, 15,095 in 1970, and 20,969 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 32.0% of the population in 1994, down from 51.2% in 1960, 44.1% in 1970 and 36.0% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 39.2% of all households in 1990, as compared with 53.0% of households in 1960, had children below the age of 18.

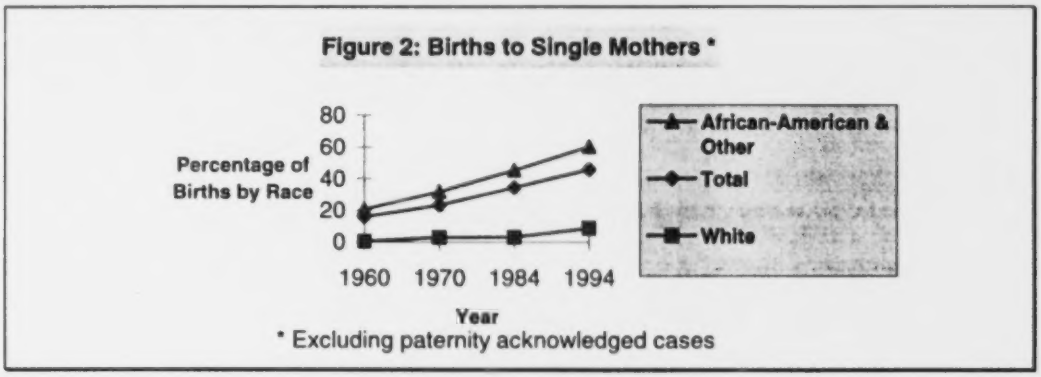
Births to Teen Mothers: In 1994, 49 babies were born to mothers younger than age 18. These babies were 9.2% of all children born in the county; 4.1% of all White babies and 11.1% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 83.7% were born to single mothers.

In 1994, 111 babies were born to mothers younger than age 20. These babies were 20.8% of all children born in the county; 10.1% of all White babies and 24.9% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 79.3% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 140 babies, 26.2% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 55.0% in 1970.

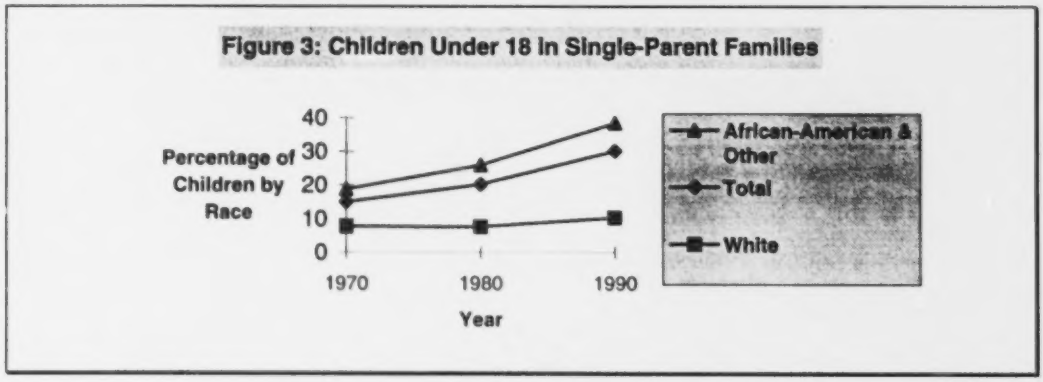
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 245 babies, 45.9% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 34.3% and in 1960 it was 15.7%. In 1994, 8.8% of White children and 60.1% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 35 babies, 6.6% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 280, constituting 52.4% of all babies, 16.9% of White babies, and 66.1% of African-American and Others.



Divorce Rate: In 1994, 293 marriage licenses were issued, while 79 divorce decrees involving 84 children were filed. In 1970 only 6 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 2,900 children lived with only one parent. This was 30.1% of all children, up from 20.2% in 1980 and 14.9% in 1970. In 1990, 10.3% of White children and 38.5% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 68.8% of mothers with children under 6 and 71.9% with children 6 - 17 were in the labor force. This has increased substantially from 36.0% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1995-96, there were 230 children investigated as alleged child abuse and neglect victims: 28.3% for physical abuse, 9.1% for sexual abuse, 66.5% for neglect, and 41.3% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 116 children were victims of abuse and neglect: of these 55.2% were male and 44.8% were female; 9.5% were White, and 90.5% were African-American and Other. By age, 39.7% were 0 - 5, 33.6% were 6 - 12, and 26.7% were 13 - 17. They constituted 1.0% of all children age 18 or younger; 0.4% of all Whites and 1.2% of all African-Americans and Others. In the verified cases, 37.9% of abused and neglected children lived in two parent families, 42.2% in single parent families, 12.9% with extended families, and 6.9% in other circumstances.

Family Violence: In 1994, 183 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 34.0% of all assaults, which include both simple and aggravated assaults. Overall, 55.2% of all domestic assaults involve spouse abuse (constituting 18.7% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 6.6% of all children did not live with their natural parents; of these, 649 or 5.4% of children lived with relatives, 143 or 1.2% lived with non-relatives, and 0 were in institutional facilities.

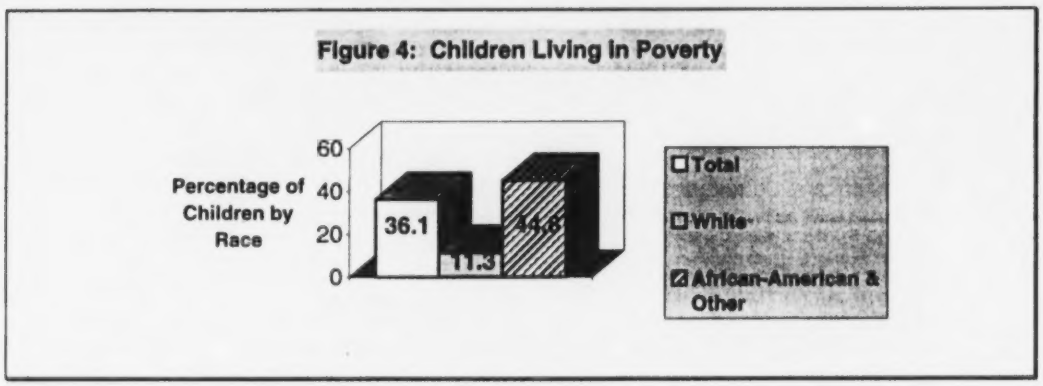
Out of Home Placements: As of September 30, 1996, 23 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 21.7% 0-2, 13.0% 3-5, 13.0% 6-10, 13.0% 11-13, and 39.1% 14 and above. The foster care population is comprised of 43.5% males and 56.5% females. Regarding their future, 26.1% were under a plan for placement in adoptive homes, 34.8% for return to a parent or guardian, 0.0% for placement with a relative, 4.3% for independent living, 30.4% for permanent foster care, and 4.3% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.13 adults for every person below age 18. This was up substantially from 1960, when there were only 0.95 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 4,247 children and youth under the age of 18 lived in families with incomes below poverty. Over 36.1% of all children and youth lived below poverty: 11.3% of Whites and 44.8% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 36.1% in 1989, it was 33.9% in 1979 and 56.4% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 36.9% of children 0 - 5 and 35.7% of children 6 - 17 lived in poverty; 37.6% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 61.2% of children in single-parent families lived in poverty, but only 21.8% of children in married-couple families were poor. Children in single-parent families made up 61.3% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 5,487 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 1,240 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	11,773	4,247	5,487	6,561	7,282	7,668	8,062
Percent		36.1%	46.6%	55.7%	61.9%	65.1%	68.5%
White	3,058	345	600	834	1,047	1,127	1,219
Percent		11.3%	19.6%	27.3%	34.2%	36.9%	39.9%
African-American and Other	8,715	3,902	4,887	5,727	6,235	6,541	6,843
Percent		44.8%	56.1%	65.7%	71.5%	75.1%	78.5%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 18.1% of households did not have a car; 6.9% of Whites and 26.3% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 17.9% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 40.4% of households had no phone.

Income: The mean income of families with children in 1989 was $26,806; in 1979, it had been $26,158, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 17.0%.

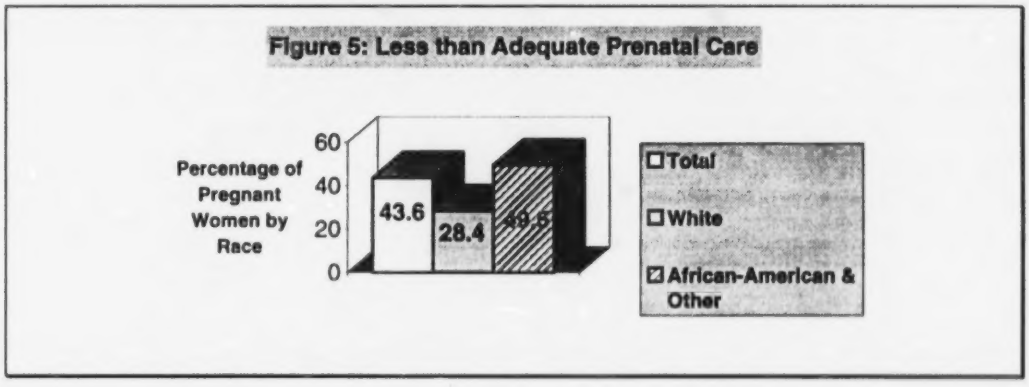
The mean income of single-parent families with children was $13,040 in 1989, as compared with $32,158 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 1,023 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 37.5% had child support court orders. The average monthly payment of child support was $135.34, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 430 parents in non-AFDC families were obligated to pay a monthly average of $161.79. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 174 or 32.6% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 233 or 43.6% of pregnant women received less than adequate prenatal care: 42 or 28.4% of Whites and 191 or 49.5% of African-Americans and Others. In that same year, 19 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 79 or 14.8% of all babies in the county were born with low birthweight. Over 17.6% of African-American babies and 7.4% of White babies were born with low birthweight. During 1992-94, approximately 48 or 2.8% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate increased by 4.6%. For Whites, the rate increased by 144.1%, while for African-Americans and Others, the rate decreased by 5.1%. Over the three-year period 1992-94, 4 White and 28 African-American and Other infants died before age one. By comparison, 2 White and 33 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 3 White and 13 African-American and Other children ages 1-14 died in the county. During 1982-84, 3 White and 10 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 59.1% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 25.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 482 to 723 youth ages 13-19 in the county were infected with a STD. In the county, there were 2 reported cases of children under age 15 and 37 youth ages 15 - 19 infected with gonorrhea; 0 youth ages 15 - 19 were reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 10.5% first smoked by age 11, 21.2% by age 13, and 30.5% by age 15. In a typical month, 11.4% of 7th and 8th graders and 12.1% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 34.0% of White 7th to 12th graders used cigarettes, in comparison with 8.8% African-Americans. A smaller but significant group of high school students (3.4%) used smokeless tobacco monthly; it was used primarily by White males (33.6%) compared with 9.0% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 1,203 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 466 students in grades 1-12 with learning disabilities and 142 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 832 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 1,780 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 9 nurses; 3 are currently available.

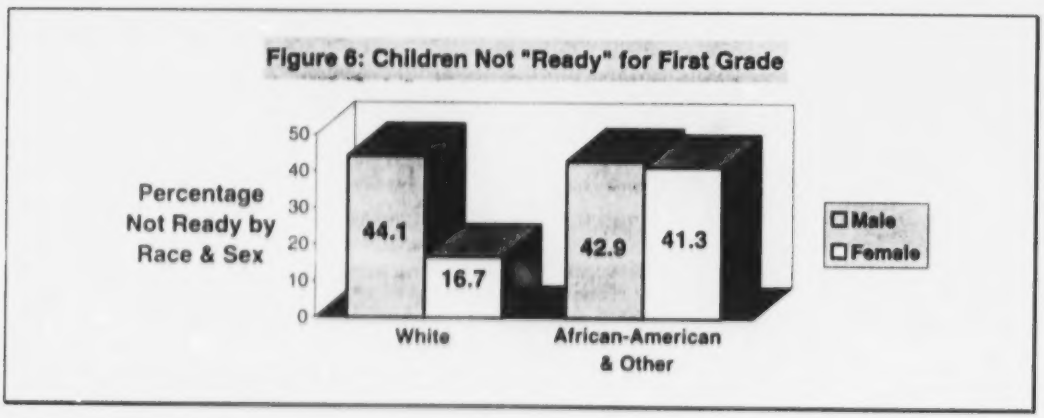
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 37.1% for Whites and 42.3% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

278 children not ready	41.2% children not ready

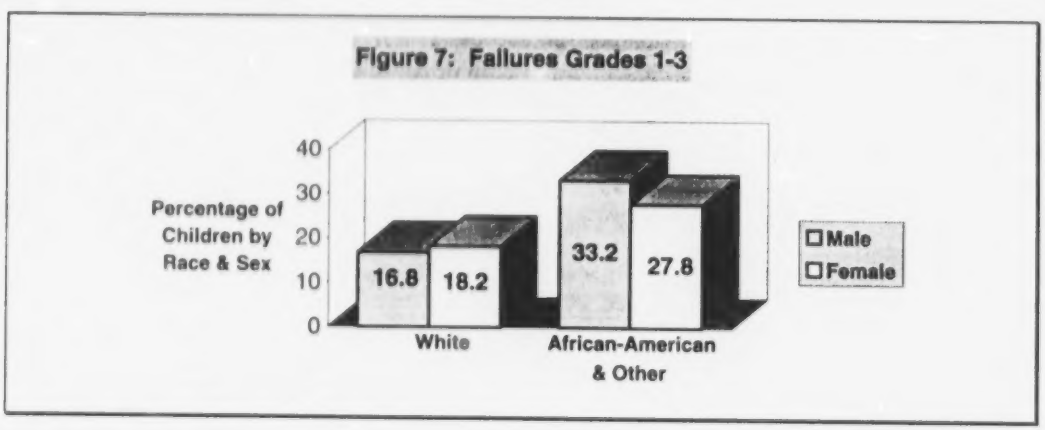


1st Grade Failures in 1995:

133 children failing	21.6% children failing

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

175 children failing	29.5% children failing



Overage for Grade 3 in 1996:

104 children overage	27.3% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 192 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 20.4% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 41.2% assessed not ready for the 1st grade, 27.3% overage in grade 3, and 20.4% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

SCHOOL ACHIEVEMENT

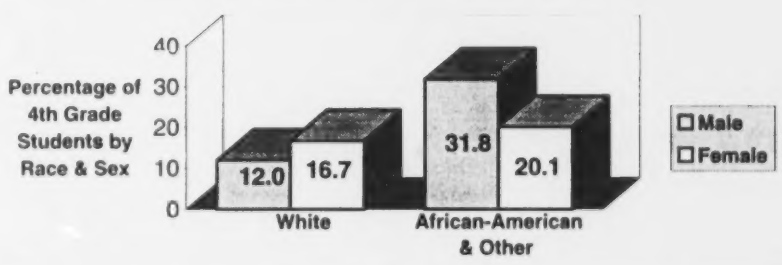
By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 142 speech and language impaired, 466 learning disabled, 6 emotionally disabled, 541 mentally impaired, and 14 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 18.8% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996 (i.e. below 75% of students nationwide)

103 children at or below 25th percentile	24.5% children at or below 25th percentile

Figure 8: Grade 4 Metropolitan at or Below 25th Percentile



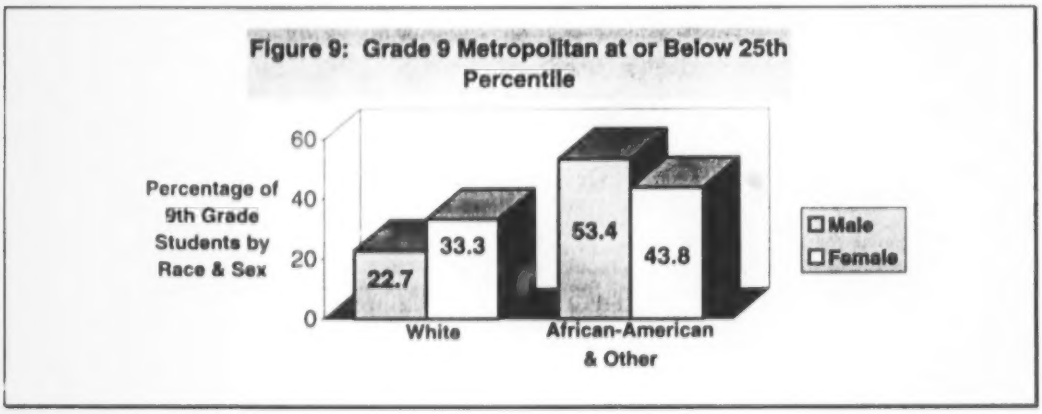
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	171	39.3	174	40.0
White Males	1	7.1	4	28.6
White Females	8	53.3	6	40.0
African-American & Other Males	71	36.0	95	48.2
African-American & Other Females	91	43.5	69	33.0

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

267 students at or below 25th percentile

47.1% students at or below 25th percentile

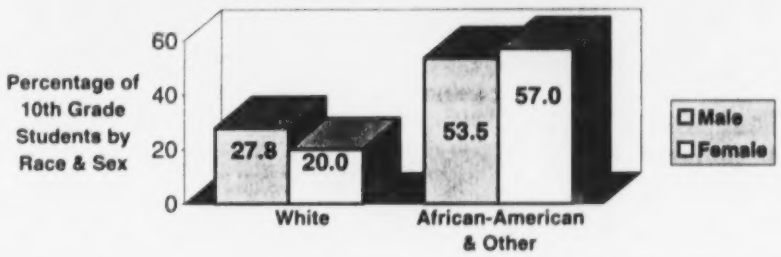


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

223 students not passing all parts

53.0% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



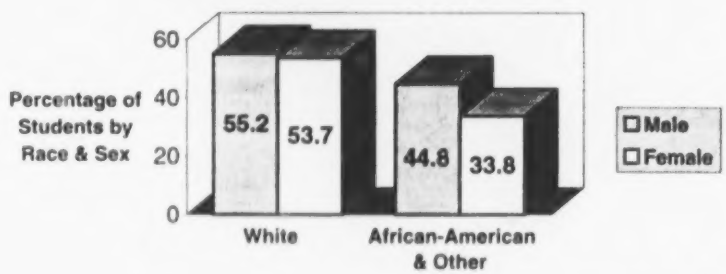
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 86.1% to 29.8% in math and from 75.0% to 24.8% in reading. During the 1990s the trend altered, with 39.3% not meeting 8th grade math standards in 1996 and 40.0% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 38.7% in 1983 on the CTBS, 41.8% in 1990 on the Stanford, and 33.3% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 41.6% in 1990 and 49.5% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

988 students drop out

41.4% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 25.0% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 39.7% during 1985-89, and 39.0% during 1990-94. During the 1995-96 period, 88.8% of all who did graduate received the State High School Diploma, while 5.3% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 5.9% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 29 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 37 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 25.8% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 24.5% to 53.0%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 258 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 9.6% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

2.5%	White Males	11.8%	African-American & Other Males
7.6%	White Females	10.7%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 53 girls between the ages of 14 and 17 became pregnant in 1993 and 54 in 1994. In 1994, this represented 4.0% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 2.9% for Whites and 4.4% for African-Americans and others. Of all pregnancies to 14-17 year olds, 88.9% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 24.1%.

Alcohol Use: In 1992-93, 23.0% of 7th and 8th graders and 27.1% of high schoolers said they had used alcohol in the past month. Of White males, 39.3% had used it in the past month, compared with 29.9% of African-American males; likewise, 32.8% of White females said they had used alcohol, compared with 18.2% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 13.3% had used alcohol by age 11 or younger, 27.4% by age 13, and 44.1% by age 15.

During the previous year, 38.3% of 7th and 8th graders and 42.3% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 16.9% said they had driven after drinking, and 8.8% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 52.8% of eighth graders and 81.7% of seniors felt that beer was easy to get; 56.6% of eighth graders and 43.8% of seniors felt there was not a great risk in using it regularly.

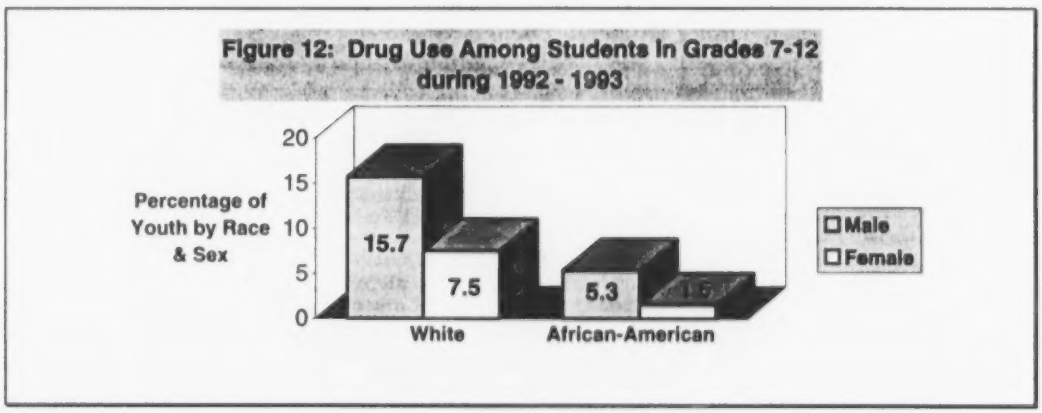
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 15.6% of all high school students in 1992-93 responded 3 or more drinks at a time; 7.4% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 3.0% of 7th and 8th graders and 5.3% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (15.7%) and White females (7.5%); use among African-American males was 5.3%; African-American females, 1.5%. Some young people first used drugs at an early age: among students 15 and older, 1.8% experienced their first use by age 11 or sooner; 3.6% had used a drug by age 13, and 7.0% by age 15.

Of seniors who had initiated use of marijuana, 6.1% had started use at home, 22.4% at a friend's home, and 71.4% elsewhere. During the past year, 1.0% of all high school students said that they used marijuana at home, 2.0% at a friend's house, and 2.0% in a car. In the past year, 3.8% of all high school students who drive and 4.3% of seniors who drive said that they had driven after using drugs . Furthermore, 3.3% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 21.3% of 8th graders who had an opinion said it is easy to get marijuana and 19.3% said it is easy to get cocaine or crack; 68.2% of seniors who had an opinion said it is easy to get marijuana and 66.0% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 8.6% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 161 individual juvenile offenders in the county were referred to the Solicitor; of these, 12.4% were age 12 or younger, 28.6% were 13 or 14, and 59.0% were 15 or older.

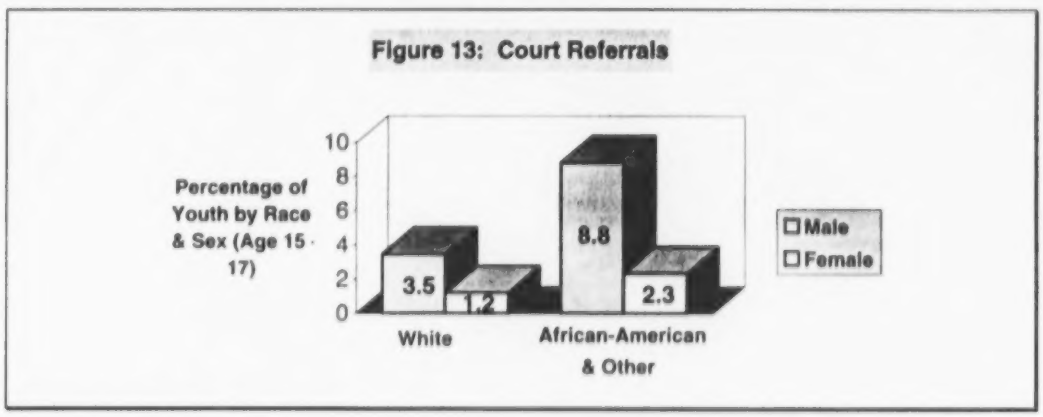
Of the referrals to the family court, 19.0% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 41 juvenile cases constituting 21.0% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 25.4% lived in families with income under $10,000, 47.8% with $10,000-$19,999 and 26.9% with $20,000 or more. Furthermore, only 24.7% of delinquents lived with both natural parents, while 45.9% lived in a single parent household and 29.5% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 29.0% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 30.4% had at least one prior referral and 11.2% had been referred to court 3 times or more.

In 1994-95, there were 6 juvenile commitments from the county to State institutions.

During 1994-95, 95 youth ages 15 to 17 were referred to the family courts. In the county, 4.8% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.



Deaths: During 1990-94, 20 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 8 deaths between 1990 and 1994; homicides killed 4 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 30.1% of children in single-parent families, 36.1% in poverty, 41.4% dropping out of school, 27.1% of high school students using alcohol and 8.6% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

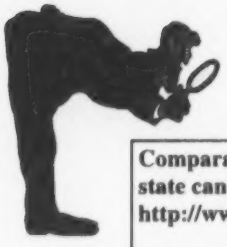
This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

Dr. A. Baron Holmes (803-734-2291) E-mail bholmes@ogc.state.sc.us
-or-
SC Kids Count
SC Budget and Control Board
Office of the Executive Director
P O Box 12444
Columbia, S. C. 29211
Fax (803) 734-1276

Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

Susan Gallop, SC Kids Count Coordinator E-mail kidcount@dhhs.state.sc.us
SC Department of Health and Human Services
1801 Main Street, P O Box 8206
Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.



Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

WILLIAMSBURG

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	49	9.2	7.3	1.26	24	1994
Births to Mothers Not Completing High School	140	26.2	21.8	1.20	29	1994
Births to Single Mothers	245	45.9	30.4	1.51	38	1994
Children in Single-Parent Families	2,900	30.1	25.1	1.20	33	1990
Parents Working	2,854	71.1	74.3	0.96	7	1990
Abuse & Neglect Victims	116	1.0	1.0	1.00	22	1995-96
Separation from Parents	792	6.6	5.1	1.29	34	1990
Economic Status						
Poor Children	4,247	36.1	21.0	1.72	39	1989
Mean Income of Families with Children	$26,806	NA	NA	0.75	42	1989
Health						
Less than Adequate Prenatal Care	233	43.6	32.0	1.36	40	1994
Low Birth Weight	79	14.8	9.2	1.61	44	1994
Not Adequately Immunized	176	25.0	18.0	1.39	44	1995
Cigarette Smokers (High School)	208	12.1	23.1	0.52	4	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	278	41.2	28.1	1.47	45	1994-95
1st Grade Failures	133	21.6	6.8	3.18	42	1994-95
Failures grades 1-3 (approx. %)	175	29.5	11.3	2.61	42	1994-95
Overage for Grade 3	104	27.3	16.2	1.69	44	1995-96
Special Education (ages 8 and 9)	192	20.4	15.3	1.33	44	1995-96
School Achievement						
Special Education Grades 1 - 12	1,169	18.8	13.0	1.45	44	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	103	24.5	27.9	0.88	12	1995-96
Grade 8 BSAP - Math (Below standards)	171	39.3	34.8	1.13	23	1995-96
Grade 8 BSAP - Reading (Below standards)	174	40.0	28.8	1.39	35	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	267	47.1	29.5	1.60	42	1995-96
Exit Exam (Not passing all parts on 1st attempt)	223	53.0	35.3	1.50	40	1995-96
Dropout Rate	988	41.4	27.3	1.52	44	1992-95
25-34 Year olds with no HS Degree or GED	1,333	25.8	19.1	1.35	30	1990
Adolescent Risk Behavior						
Not in School or Employed	258	9.6	9.6	1.00	15	1990
Pregnancy (Ages 14 - 17)	54	4.0	4.8	0.83	7	1994
Alcohol Use (High School)	465	27.1	37.4	0.72	1	1992-93
Drug Use (High School)	91	5.3	12.8	0.41	5	1992-93
Binge Drinking (5 or more drinks)	127	7.4	16.3	0.45	2	1992-93
Delinquency (ages 15 - 17)	95	4.8	6.4	0.75	8	1994-95

* 1 = "best" 46 = "worst"

WILLIAMSBURG TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	61	10.2	1.55	1992	44	7.3	1.11	1993	49	9.2	1.26	1994
Births to Mothers Not Completing High School	180	30.2	1.28	1992	138	23.0	1.03	1993	140	26.2	1.20	1994
Births to Single Mothers	283	47.4	1.56	1992	276	46.1	1.52	1993	245	45.9	1.51	1994
Children in Single-Parent Families		14.9	1.03	1970		20.2	1.07	1980	2,900	30.1	1.20	1990
Economic Status												
Poor Children		56.4	1.97	1969		33.9	1.60	1979	4,247	36.1	1.72	1989
Mean Income of Families with Children					26,158	N/A	1.26	1979	26,806	N/A	1.33	1989
Health												
Less than Adequate Prenatal Care	372	62.3	1.58	1992	323	53.9		[illegible]	233	43.6	1.36	1994
Low Birth Weight	88	14.7	1.63	1992	77	12.9	1	[illegible]	79	14.8	1.61	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	267	38.4	1.44	1990-91	220	37.4	1.35	1992-93	278	41.2	1.47	1994-95
1st Grade Failures	120	18.9	2.10	1991-92	118	21.7	2.24	1992-93	133	21.6	3.18	1994-95
Failures Grades 1-3 (approx. %)	174	29.8	2.11	1991-92	154	30.0	2.10	1992-93	175	29.5	2.61	1994-95
Overage for Grade 3	206	41.3	1.59	1991-92	140	32.3	1.58	1993-94	104	27.3	1.69	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	70	15.6	0.81	1991-92	81	17.9	0.90	1993-94	103	24.5	0.88	1995-96*
Grade 8 BSAP - Math (Below Standards)	134	27.3	1.01	1991-92	197	38.0	1.23	1993-94	171	39.3	1.13	1995-96
Grade 8 BSAP - Reading (Below Standards)	120	24.4	1.00	1991-92	203	39.1	1.36	1993-94	174	40.0	1.39	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	210	38.1	1.74	1991-92	255	44.5	1.83	1993-94	267	47.1	1.60	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	199	49.6	1.59	1991-92	202	48.9	1.50	1993-94	223	53.0	1.50	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	69	5.2	1.11	1992	53	4.0	0.89	1993	54	4.0	0.83	1994
Alcohol Use (High School)	362	22.8	0.57	1989-90					465	27.1	0.72	1992-93
Drug Use (High School)	56	3.5	0.26	1989-90					91	5.3	0.41	1992-93
Binge Drinking (5 or more drinks)		4.9	0.31	1989-90					127	7.4	0.45	1992-93

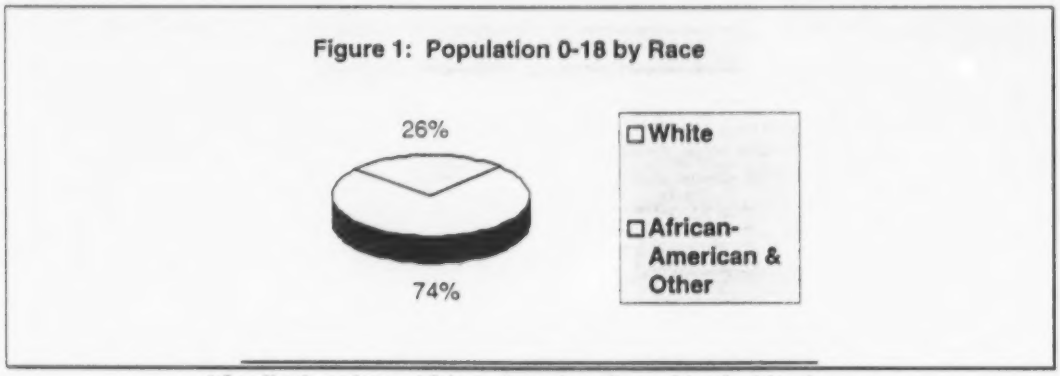
SOUTH CAROLINA kids count

1996 Report YORK

DEMOGRAPHICS

In 1994, there were 37,040 children under age 18 in the county. Of these, 27,170 were White and 9,870 were African-American and Other races. There were 32,379 children under age 18 in 1980, 30,755 in 1970, and 32,538 in 1960.

Children represent a shrinking portion of the county's population. Those under 18 constituted 26.2% of the population in 1994, down from 41.3% in 1960, 36.1% in 1970 and 30.3% in 1980.



* In all other charts African-American is combined with other races.

FAMILY

Families are the source of children's love, protection, and identity. Children depend on their families for material needs, stimulation, and guidance. All families have strengths, but many today face exceptional challenges.

Families with children now make up a smaller share of all households. Only 36.2% of all households in 1990, as compared with 49.0% of households in 1960, had children below the age of 18.

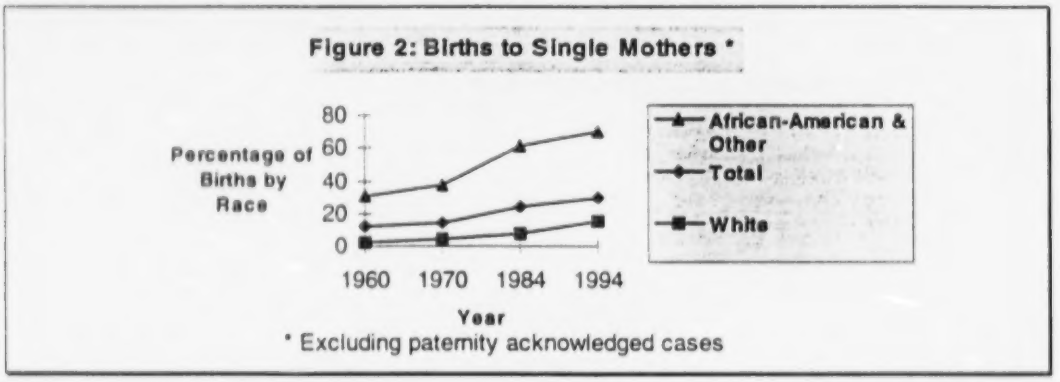
Births to Teen Mothers: In 1994, 135 babies were born to mothers younger than age 18. These babies were 7.0% of all children born in the county; 5.1% of all White babies and 12.2% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1994, 80.0% were born to single mothers.

In 1994, 313 babies were born to mothers younger than age 20. These babies were 16.2% of all children born in the county; 12.8% of all White babies and 25.3% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1994, 69.6% were born to single mothers.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1994, 441 babies, 22.8% of all babies, were born to mothers of all ages who had not completed the 12th grade. This is a substantial improvement from 48.0% in 1970.

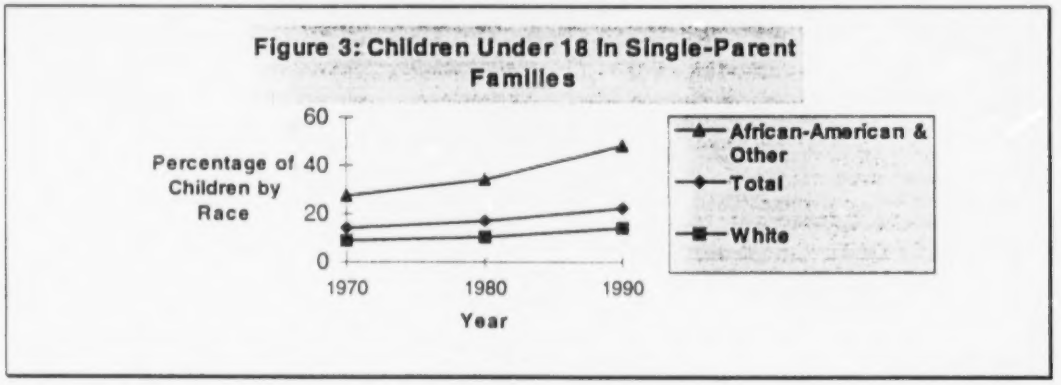
Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1994, 574 babies, 29.7% of all babies, were born to single mothers. A decade earlier in 1984, the percentage was 24.2% and in 1960 it was 12.5%. In 1994, 15.0% of White children and 69.7% of African-American and Other children were born to single mothers.

To these numbers should be added an additional group of 50 babies, 2.6% of all born in 1994, whose fathers formally acknowledged paternity but who had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1994 was 624, constituting 32.2% of all babies, 17.9% of White babies, and 71.6% of African-American and Others.



Divorce Rate: In 1994, 3,113 marriage licenses were issued, while 500 divorce decrees involving 397 children were filed. In 1970 only 235 children were involved in divorce.

Single-Parent Family: An increasing number of children live in single-parent families. In 1990, 6,554 children lived with only one parent. This was 21.9% of all children, up from 16.8% in 1980 and 14.0% in 1970. In 1990, 14.0% of White children and 48.3% of African-American and Other children lived in single-parent families.



Parents Working: Increasingly children must share their parents with employers. In order to meet family financial needs, most parents work and thus have less time for family life. In 1990, 69.1% of mothers with children under 6 and 79.5% with children 6 - 17 were in the labor force. This has increased substantially from 43.8% of mothers with children under 6 in the labor force in 1960. Most fathers also work. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

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Abuse and Neglect: In 1995-96, there were 1,354 children investigated as alleged child abuse and neglect victims: 36.0% for physical abuse, 10.5% for sexual abuse, 72.2% for neglect, and 23.3% for mental injury and threat of harm for physical and/or sexual abuse. These percentages do not sum to 100% because many children investigated were involved in multiple areas of abuse and neglect.

Through its investigations, the Department of Social Services found enough evidence to determine that 361 children were victims of abuse and neglect: of these 45.2% were male and 54.8% were female; 63.7% were White, and 36.3% were African-American and Other. By age, 41.8% were 0 - 5, 37.7% were 6 - 12, and 20.5% were 13 - 17. They constituted 1.0% of all children age 18 or younger; 0.8% of all Whites and 1.3% of all African-Americans and Others. In the verified cases, 21.9% of abused and neglected children lived in two parent families, 58.2% in single parent families, 8.3% with extended families, and 11.6% in other circumstances.

Family Violence: In 1994, 1,492 domestic assaults within families were recorded by law enforcement officials. These domestic assaults comprised 30.0% of all assaults, which include both simple and aggravated assaults. Overall, 55.5% of all domestic assaults involve spouse abuse (constituting 16.8% of all assaults). Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children no longer live with their natural parents. In 1990, 4.3% of all children did not live with their natural parents; of these, 830 or 2.4% of children lived with relatives, 535 or 1.6% lived with non-relatives, and 105 were in institutional facilities.

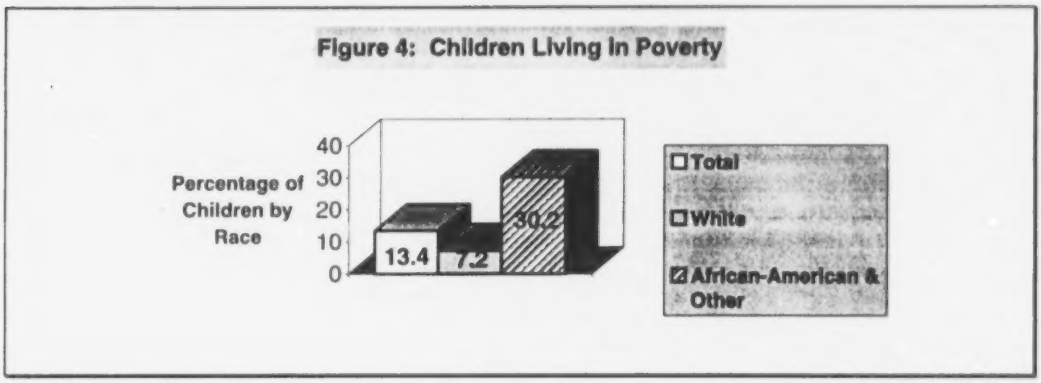
Out of Home Placements: As of September 30, 1996, 167 children lived in foster care. The median age at first placement statewide is 6 1/2 years. The ages of children in foster care were 9.0% 0-2, 12.6% 3-5, 25.7% 6-10, 13.8% 11-13, and 38.9% 14 and above. The foster care population is comprised of 50.3% males and 49.7% females. Regarding their future, 18.0% were under a plan for placement in adoptive homes, 69.5% for return to a parent or guardian, 1.8% for placement with a relative, 4.8% for independent living, 3.6% for permanent foster care, and 2.4% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1994 there were 2.81 adults for every person below age 18. This was up substantially from 1960, when there were only 1.42 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

ECONOMIC STATUS

Poverty and low income make it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 4,507 children and youth under the age of 18 lived in families with incomes below poverty. Over 13.4% of all children and youth lived below poverty: 7.2% of Whites and 30.2% of African-Americans and others.



Poverty has always been a serious problem. While the rate among children under age 18 was 13.4% in 1989, it was 14.4% in 1979 and 19.1% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 14.1% of children 0 - 5 and 13.0% of children 6 - 17 lived in poverty; 15.2% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 38.2% of children in single-parent families lived in poverty, but only 5.1% of children in married-couple families were poor. Children in single-parent families made up 67.3% of all the county's children living in poverty.

In 1996, the poverty level was $12,980 for a family of three and $15,600 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Many federal programs require varying thresholds. For example, in 1989 there were 6,201 children ages 0 - 17 who were less than 125 percent of poverty; thus an additional 1,694 children were above the poverty level but could still be considered poor.

Children Under 18
1990

	All Children	Below 100% of Poverty	Below 125% of Poverty	Below 150% of Poverty	Below 175% of Poverty	Below 185% of Poverty	Below 200% of Poverty
Total	33,705	4,507	6,201	7,900	9,944	10,702	11,884
Percent		13.4%	18.4%	23.4%	29.5%	31.8%	35.3%
White	24,613	1,760	2,726	3,804	5,130	5,636	6,434
Percent		7.2%	11.1%	15.5%	20.8%	22.9%	26.1%
African-American and Other	9,092	2,747	3,475	4,096	4,814	5,066	5,450
Percent		30.2%	38.2%	45.1%	52.9%	55.7%	59.9%

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Because of poverty, many families have barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. In the county in 1990, 8.3% of households did not have a car; 5.3% of Whites and 22.4% of African-Americans and Others did not have a car. This issue becomes more critical in rural areas where there is little or no public transportation available.

Poor people without a phone find themselves at a serious disadvantage when competing for employment. Approximately 7.9% of all households in 1990 did not have a telephone. This is more often a problem in renter-occupied housing units where 18.9% of households had no phone.

Income: The mean income of families with children in 1989 was $40,068; in 1979, it had been $36,183, adjusted for inflation (i.e., in 1989 dollars). From 1989 to 1994, county real dollar per capita income (eliminating inflation) changed by 6.4%.

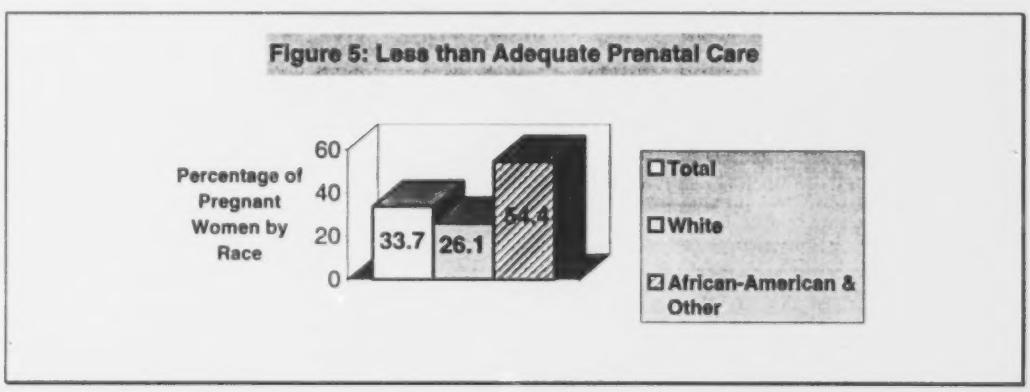
The mean income of single-parent families with children was $18,748 in 1989, as compared with $45,755 in married-couple families with children.

Child Support Payments: Because so many poor children live in single-parent families, child support payments are critical to their financial well-being. There were 1,238 families receiving Aid to Families with Dependent Children in Fiscal Year 1995, but only 38.1% had child support court orders. The average monthly payment of child support was $163.41, including child support receipts and tax refund intercepts. In addition, during fiscal year 1995, an estimated 682 parents in non-AFDC families were obligated to pay a monthly average of $184.79. Information is not available regarding the amount actually paid.

HEALTH

Good health in the early and formative years fosters the development of children to reach their maximum potential. Good health requires responsible habits and effective primary care, starting during the prenatal period and continuing through adolescence. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in healthy births. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1994, 511 or 26.4% of pregnant women received no prenatal care in the first three months of pregnancy. In 1994, 652 or 33.7% of pregnant women received less than adequate prenatal care: 370 or 26.1% of Whites and 282 or 54.4% of African-Americans and Others. In that same year, 24 women received no prenatal care at all.



Low Birthweight: Low birthweight (less than 5.5 pounds) is associated with health risks and growth and development problems. Infants with very low birthweight (less than 3.5 pounds) have the most serious complications.

In 1994, 166 or 8.6% of all babies in the county were born with low birthweight. Over 12.7% of African-American babies and 7.1% of White babies were born with low birthweight. During 1992-94, approximately 113 or 1.9% of all babies were born with very low birthweight.

Infant Mortality: During the decade since 1982-84, the overall infant mortality rate decreased by 38.4%. For Whites, the rate decreased by 48.7%, while for African-Americans and Others, the rate decreased by 19.1%. Over the three-year period 1992-94, 31 White and 31 African-American and Other infants died before age one. By comparison, 48 White and 36 African-American and other infants died during 1982-84.

Child Deaths: Childhood deaths and injuries reflect whether communities are safe for their children. In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1992-94, 16 White and 8 African-American and Other children ages 1-14 died in the county. During 1982-84, 28 White and 12 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. Inadequate care was reflected by the fact that, during FY 1989-90, 50.4% of children less than two years old seen in public health clinics were not fully immunized against such preventable diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in December 1995 had declined in the county to 17.0%. This underscores the potential to improve the status of children when the leadership of the state and its communities act decisively together. The public health clinic data represents roughly half of two year old children in the county. The DHEC statewide birth registry survey of all two year old children found that 91.8% were fully immunized in 1996.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, which is closely linked with cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youths aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1994, this would indicate that an estimated 1,476 to 2,214 youth ages 13-19 in the county were infected with a STD. In the county, there were 13 reported cases of children under age 15 and 118 youth ages 15 - 19 infected with gonorrhea; 1 youth ages 15 - 19 was reported infected with syphilis.

Healthy Lifestyles: Although no county data is available, the Youth Risk Behavior Survey in 1995 found that many high school students are not following good health habits. Only 56% felt that they were the right weight; 36% were trying to lose weight. While only 24% ate salad, 53% ate fruit, and 47% ate vegetables yesterday, 56% ate hamburgers, hot dogs, or sausage, 69% ate french fries or potato chips, and 60% ate cookies, doughnuts, pie, or cakes. Only 42% did stretching or muscle strengthening exercises; and 52% exercised in sports for 20 minutes three or more times a week that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts early and is widespread among some groups. In 1992-93 among students 15 and older, 14.4% first smoked by age 11, 32.3% by age 13, and 45.5% by age 15. In a typical month, 18.5% of 7th and 8th graders and 25.7% of high school students smoked cigarettes. White youths are much more likely than African-Americans to smoke: 28.3% of White 7th to 12th graders used cigarettes, in comparison with 5.8% African-Americans. A smaller but significant group of high school students (8.7%) used smokeless tobacco monthly; it was used primarily by White males (21.4%) compared with 9.0% of all other race and sex groups. Since the 1992-93 survey, monthly cigarette smoking has increased statewide by 43% from 23% in 1993 to 33% in 1995; recent data is not available by county.

Disabilities: No data are collected on the true prevalence of disabilities within the county. According to nationally reported estimates, over 10% of children and youth have developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1994 this suggests that at least an estimated 3,704 children and youth under age 18 in the county are currently affected by disabilities.

Approximately 5% nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% who have serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Less severe health disabilities also affect the lives of many children. Over 3% of children have one or more of these limitations. Less severe disabilities affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 1,056 students in grades 1-12 with learning disabilities and 727 students in grades 1-12 with speech/language deficits.

Emotional and Behavioral Disorders: While no data are available on the prevalence of mental health problems in the county, national estimates indicate that at least 10 - 15% and as much as 20% of school-age children exhibit mental and behavioral disorders ranging from mild to severe. At the lower estimate of 10% of the school-aged population, there are 2,440 children and youth in the county with emotional and behavioral disorders. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, each affecting 3% to 10% of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. One indicator of emotional problems is the 10% of high school students in South Carolina who reported that they had attempted suicide in the past year.

Inadequate Healthcare: No data is routinely collected by county regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 14.8% of children and youth under age 18 in South Carolina had no health insurance coverage in 1994. Estimates for each county appear too conflicting to be reliable until further analysis is performed. If the rate in the county were the same as the 14.8% statewide, there would be 5,482 children in the county who have no health insurance. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The ratio of students to nurses recommended nationally is 750 : 1. In the county, this would suggest the need for 34 nurses; 12 are currently available.

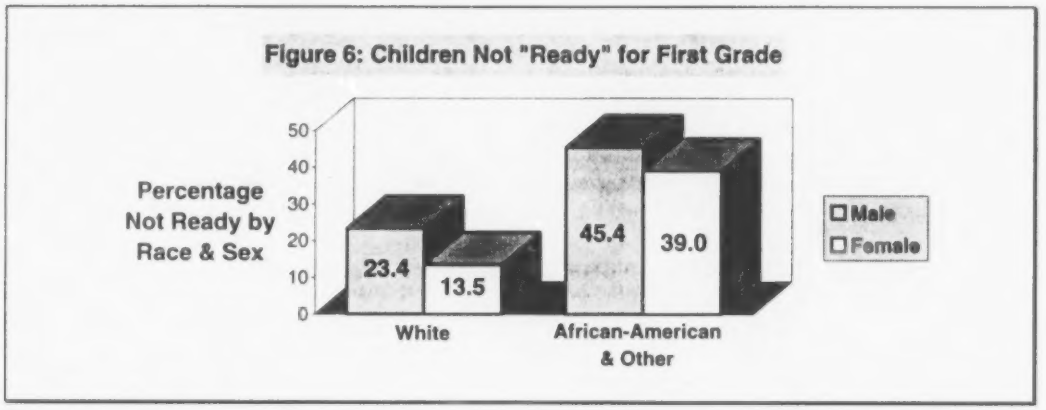
Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that are for ambulatory care sensitive conditions, especially pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. It appears that the share of hospitalizations for ambulatory care sensitive conditions could be kept below 20%; for children in the county under the age of 18, the share was 27.8% for Whites and 32.4% for African-Americans and Others in 1995.

READINESS AND EARLY SCHOOL PERFORMANCE

Too many children reach school without the readiness skills needed for success in learning. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

1st Grade "Readiness" on 1995 Cognitive Skills Assessment Battery (CSAB):

570 children not ready **25.9% children not ready**

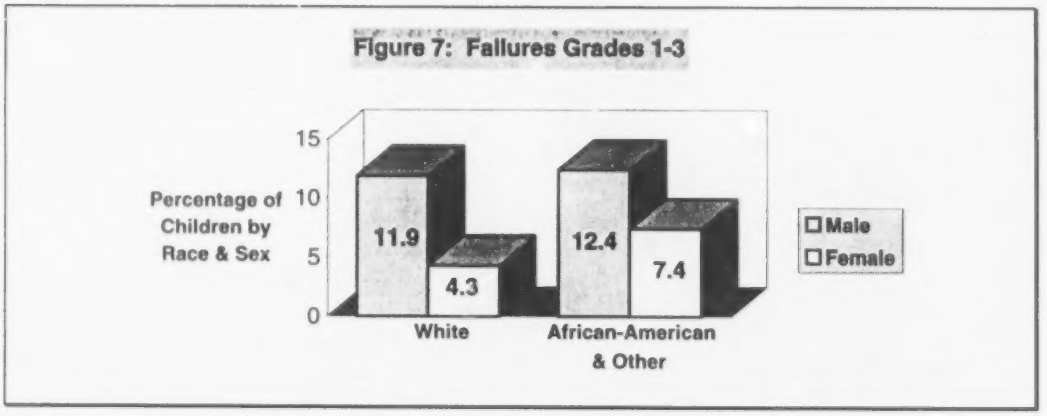


1st Grade Failures in 1995:

139 children failing **6.4% children failing**

Failures Grades 1-3 (approximate three year cumulative percentage) in 1995:

189 children failing **8.9% children failing**



Overage for Grade 3 in 1996:

341 children overage	17.1% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 530 eight and nine year-olds were enrolled in special education classes during 1995-96, approximately 13.0% of their age group.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 25.9% assessed not ready for the 1st grade, 17.1% overage in grade 3, and 13.0% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation.

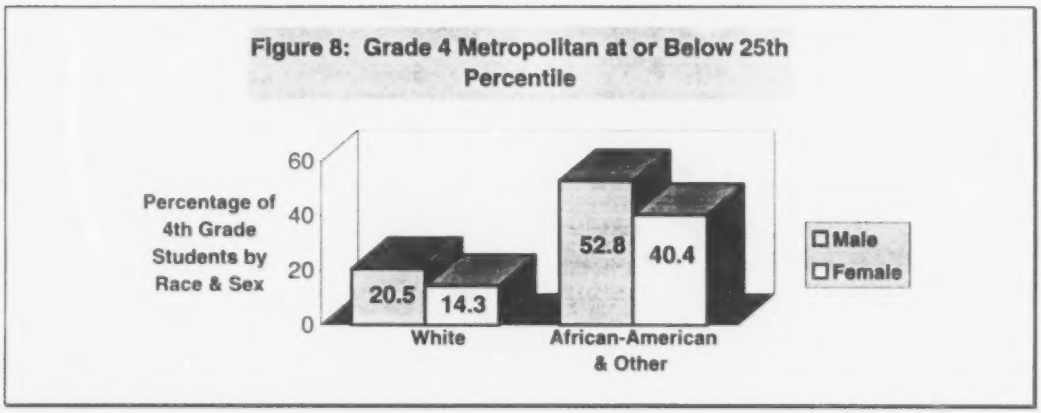
SCHOOL ACHIEVEMENT

By the end of elementary school, significant numbers of students perform below minimum standards. The following standardized test measures, comparing county performance with student norms nationwide or to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 727 speech and language impaired, 1,056 learning disabled, 156 emotionally disabled, 387 mentally impaired, and 125 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 10.7% of all students in grades 1 - 12 during 1995-96.

Grade 4 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996
(i.e. below 75% of students nationwide)

498 children at or below 25th percentile	25.1% children at or below 25th percentile



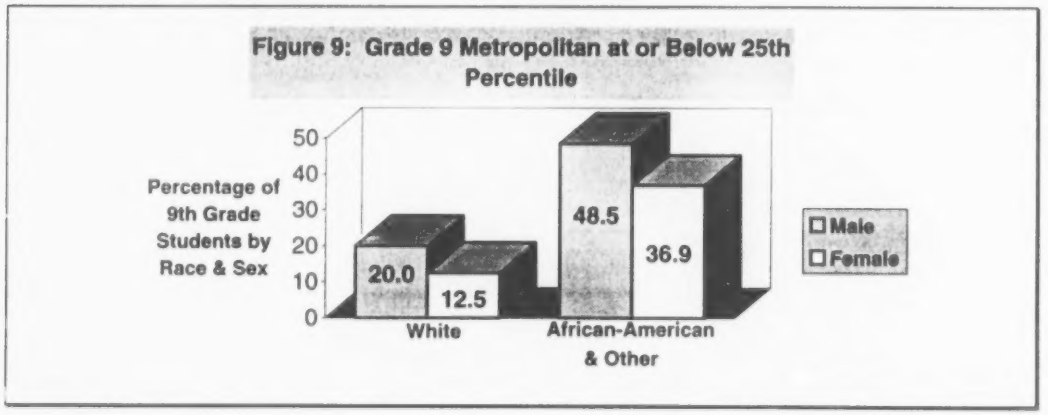
BSAP (Basic Skills Assessment Program) - not meeting state minimum standards in grade 8 in 1996

	Math # below standards	Math % below standards	Reading # below standards	Reading % below standards
All Students	495	24.6	467	23.3
White Males	134	17.3	154	20.1
White Females	153	21.0	108	14.8
African-American & Other Males	106	41.9	110	43.5
African-American & Other Females	102	40.0	95	37.1

Grade 9 Metropolitan at or below 25th percentile in Reading, Math, and Language in 1996

469 students at or below 25th percentile

23.7% students at or below 25th percentile

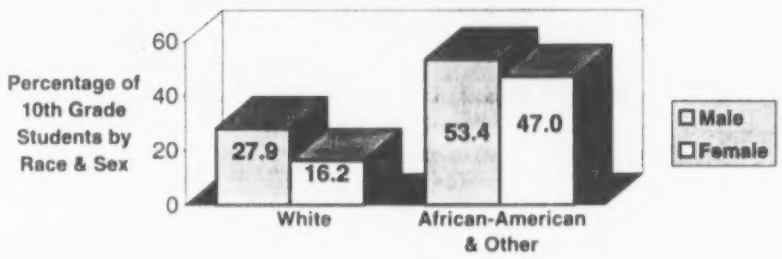


Exit Exam - not passing all parts of Exit Exam on first attempt in the 10th grade in 1996

476 students not passing all parts

29.0% students not passing all parts

Figure 10: 10th Grade Students Not Passing All Parts of the Exit Exam



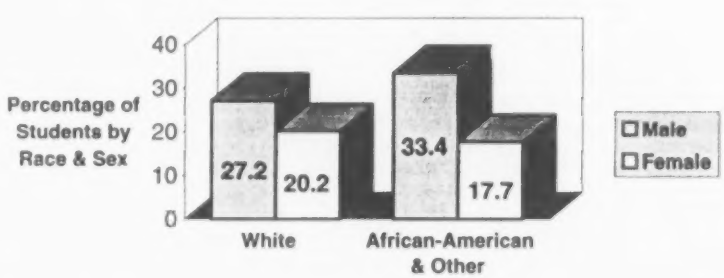
Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the county who did not meet standards declined from 47.1% to 24.6% in math and from 39.3% to 21.4% in reading. During the 1990s the trend altered, with 24.6% not meeting 8th grade math standards in 1996 and 23.3% in reading. On norm-referenced tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of county 4th grade students at or below the 25th percentile of national norms was 23.7% in 1983 on the CTBS, 25.6% in 1990 on the Stanford, and 27.3% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 25.6% in 1990 and 19.0% in 1995.

Dropout Rate - 8th grade students no longer enrolled in grade 12
(average of students for the four years ending 1992 - 95)

1,758 students drop out

24.3% students drop out

Figure 11: Dropout Rate, 1992-1995



Dropouts: A distressing number of students drop out and fail to graduate. An average 35.3% of 8th graders failed to graduate from county schools five years later during the period 1980-84, 28.1% during 1985-89, and 25.6% during 1990-94. During the 1995-96 period, 91.9% of all who did graduate received the State High School Diploma, while 2.5% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 5.6% received a District Certificate.

Fortunately, significant numbers of dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1994-95, 97 Adult Education high school diplomas were awarded to school completers in the county. During 1995, 201 GEDs were awarded in the county. Over time, adult education high school diplomas and GEDs increase the effective school completion rate substantially. In the 1990 Census, 22.1% of county resident 25 - 34 year-olds said they had not completed either high school or a GED.

Achievement Summary: The numbers of students not meeting standards, testing in the bottom quarter nationally, and dropping out range from 23.3% to 29.0%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

ADOLESCENT RISK BEHAVIORS

Not in School or Employed: Idleness was the condition of 876 teens aged 16 - 19 who neither worked nor were enrolled in school during 1990. Idle teens comprised 9.8% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

6.1%	White Males	15.9%	African-American & Other Males
10.0%	White Females	12.8%	African-American & Other Females

Sexual Activity and Pregnancy: Sexual activity is widespread. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of students throughout South Carolina showed that sexual activity begins early: one-fifth of female and two fifths of male students have engaged in intercourse by age 13; by age 15, half the females and three fifths of males have initiated sexual intercourse. Statewide, 55% of females and 56% of males in the 11th and 12th grades reported engaging in intercourse during the past three months, and 26% of female and 40% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Pregnancy occurs often when children prematurely become sexually active. In the county, 162 girls between the ages of 14 and 17 became pregnant in 1993 and 185 in 1994. In 1994, this represented 4.3% of all girls ages 14 - 17; several times this percentage become pregnant at least once by age 18. In 1994 the pregnancy rate for ages 14 - 17 was 3.4% for Whites and 6.5% for African-Americans and others. Of all pregnancies to 14-17 year olds, 71.4% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen preganancy rate decreased by 13.9% statewide; in the county, it decreased by 23.9%.

Alcohol Use: In 1992-93, 19.1% of 7th and 8th graders and 35.2% of high schoolers said they had used alcohol in the past month. Of White males, 31.8% had used it in the past month, compared with 22.8% of African-American males; likewise, 29.3% of White females said they had used alcohol, compared with 21.3% of African-American females. Many youth first used alcohol at an early age: among students 15 and older, 13.9% had used alcohol by age 11 or younger, 35.1% by age 13, and 58.0% by age 15.

During the previous year, 32.1% of 7th and 8th graders and 38.1% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 25.1% said they had driven after drinking, and 7.0% of seniors said they had attended school while under the influence of alcohol. Widespread use is facilitated by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 58.4% of eighth graders and 88.9% of seniors felt that beer was easy to get; 44.6% of eighth graders and 45.5% of seniors felt there was not a great risk in using it regularly.

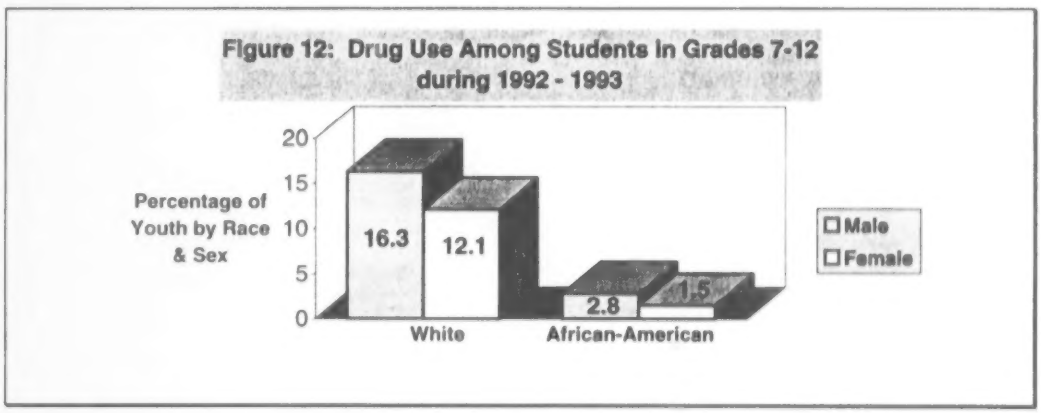
No county-level surveys of alcohol or drug use have been administered since 1992/93; however, the statewide sample YRBS showed that the percentage of high school students drinking alcohol monthly has increased slightly from 44% in 1993 to 46% in 1995.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 27.6% of all high school students in 1992-93 responded 3 or more drinks at a time; 16.8% of high schoolers reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students has increased from 25% in 1993 to 27% in 1995.

Drugs: In 1992-93, 6.9% of 7th and 8th graders and 14.3% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (16.3%) and White females (12.1%); use among African-American males was 2.8%; African-American females, 1.5%. Some young people first used drugs at an early age: among students 15 and older, 3.2% experienced their first use by age 11 or sooner; 9.9% had used a drug by age 13, and 20.1% by age 15.

Of seniors who had initiated use of marijuana, 10.2% had started use at home, 45.6% at a friend's home, and 44.2% elsewhere. During the past year, 5.0% of all high school students said that they used marijuana at home, 10.7% at a friend's house, and 7.0% in a car. In the past year, 7.4% of all high school students who drive and 11.5% of seniors who drive said that they had driven after using drugs . Furthermore, 8.7% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 28.4% of 8th graders who had an opinion said it is easy to get marijuana and 17.6% said it is easy to get cocaine or crack; 77.0% of seniors who had an opinion said it is easy to get marijuana and 58.2% cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has increased substantially since the 1992-93 survey. Monthly marijuana use by high school students has grown 62% from 13% in 1993 to 21% in 1995. Therefore rates in the county are likely to have increased significantly and could be estimated by increasing the 1992-93 rates by a factor such as the 62% increase experienced statewide; this would produce a 23.2% rate for county high school students in 1995.



Juvenile Delinquency: In 1994-95, 994 individual juvenile offenders in the county were referred to the Solicitor; of these, 10.1% were age 12 or younger, 29.9% were 13 or 14, and 60.1% were 15 or older.

Of the referrals to the family court, 8.8% of all referrals were for violent and serious crimes which include acts against persons for murder, rape, robbery, and aggravated assault, drug trafficking, and serious property offenses for arson and burglary. Also 505 juvenile cases constituting 31.1% of all referrals were for status offenses; status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

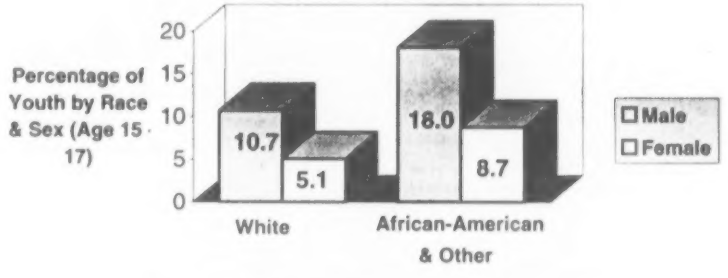
Delinquents are likely to live in families with low income: 28.8% lived in families with income under $10,000, 30.3% with $10,000-$19,999 and 40.9% with $20,000 or more. Furthermore, only 22.7% of delinquents lived with both natural parents, while 50.4% lived in a single parent household and 26.9% lived with other relatives. Delinquency or criminal activity occurs among many related family members: 46.6% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1994-95, 36.6% had at least one prior referral and 13.8% had been referred to court 3 times or more.

In 1994-95, there were 28 juvenile commitments from the county to State institutions.

During 1994-95, 594 youth ages 15 to 17 were referred to the family courts. In the county, 9.2% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in some crime is two or three times the number ever apprehended.

Figure 13: Court Referrals



Deaths: During 1990-94, 44 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 23 deaths between 1990 and 1994; homicides killed 6 youth 15 to 19 years-old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

SUMMARY

The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in the county. The 21.9% of children in single-parent families, 13.4% in poverty, 24.3% dropping out of school, 35.2% of high school students using alcohol and 23.2% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

This version of the Kids Count county report will be revised as more recent and additional data become available. Please send your corrections and suggestions for improvement to:

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-or-
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Calls for copies of reports for other counties and inquiries regarding more recent reports should be made to :

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Columbia SC 29202 - 8206
(803) 253-6177
Fax (803) 253-4173

We welcome your ideas for ways to make the county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

Comparable reports for all 46 counties and for the state can also be found on the world wide web at http://www.state.sc.us/drss/kc.html

The national Kids Count Report can be found at http://www.aecf.org/aeckids.htm

YORK

Indicator	Number	Percent County	Percent State	Ratio Cnty/State	County Rank *	Year
Family						
Births to Teen Mothers	135	7.0	7.3	0.96	12	1994
Births to Mothers Not Completing High School	441	22.8	21.8	1.05	16	1994
Births to Single Mothers	574	29.7	30.4	0.98	12	1994
Children in Single-Parent Families	6,554	21.9	25.1	0.87	8	1990
Parents Working	10,751	76.1	74.3	1.02	29	1990
Abuse & Neglect Victims	361	1.0	1.0	1.00	22	1995-96
Separation from Parents	1,470	4.3	5.1	0.84	8	1990
Economic Status						
Poor Children	4,507	13.4	21.0	0.64	3	1989
Mean Income of Families with Children	$40,068	NA	NA	1.13	3	1989
Health						
Less than Adequate Prenatal Care	652	33.7	32.0	1.05	26	1994
Low Birth Weight	166	8.6	9.2	0.93	15	1994
Not Adequately Immunized	365	17.0	18.0	0.94	30	1995
Cigarette Smokers (High School)	1,378	25.7	23.1	1.11	37	1992-93
Readiness and Early School Performance						
1st Grade "Not Ready"	570	25.9	28.1	0.92	16	1994-95
1st Grade Failures	139	6.4	6.8	0.94	20	1994-95
Failures grades 1-3 (approx. %)	189	8.9	11.3	0.79	13	1994-95
Overage for Grade 3	341	17.1	16.2	1.06	25	1995-96
Special Education (ages 8 and 9)	530	13.0	15.3	0.85	13	1995-96
School Achievement						
Special Education Grades 1 - 12	2,451	10.7	13.0	0.82	5	1995-96
Grade 4 Metropolitan (At or below 25th percentile)	498	25.1	27.9	0.90	13	1995-96
Grade 8 BSAP - Math (Below standards)	495	24.6	34.8	0.71	3	1995-96
Grade 8 BSAP - Reading (Below standards)	467	23.3	28.8	0.81	7	1995-96
Grade 9 Metropolitan (At or below 25th percentile)	469	23.7	29.5	0.80	6	1995-96
Exit Exam (Not passing all parts on 1st attempt)	476	29.0	35.3	0.82	6	1995-96
Dropout Rate	1,758	24.3	27.3	0.89	13	1992-95
25-34 Year olds with no HS Degree or GED	4,850	22.1	19.1	1.16	17	1990
Adolescent Risk Behavior						
Not in School or Employed	876	9.8	9.6	1.02	17	1990
Pregnancy (Ages 14 - 17)	185	4.3	4.8	0.90	10	1994
Alcohol Use (High School)	1,888	35.2	37.4	0.94	18	1992-93
Drug Use (High School)	767	14.3	12.8	1.12	40	1992-93
Binge Drinking (5 or more drinks)	901	16.8	16.3	1.03	29	1992-93
Delinquency (ages 15 - 17)	594	9.2	6.4	1.44	41	1994-95

* 1 = "best" 46 = "worst"

YORK TRENDS

Indicator	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year	Number	Percent	Ratio Cnty/ State	Year
Family												
Births to Teen Mothers	140	6.8	1.03	1992	117	5.9	0.89	1993	135	7.0	0.96	1994
Births to Mothers Not Completing High School	550	26.6	1.13	1992	453	23.0	1.03	1993	441	22.8	1.05	1994
Births to Single Mothers	617	29.9	0.99	1992	598	30.3	1.00	1993	574	29.7	0.98	1994
Children in Single-Parent Families		14.0	0.97	1970		16.8	0.89	1980	6,554	21.9	0.87	1990
Economic Status												
Poor Children		19.1	0.67	1969		14.4	0.68	1979	4,507	13.4	0.64	1989
Mean Income of Families with Children					36,183	N/A	0.91	1979	40,068	N/A	0.89	1989
Health												
Less than Adequate Prenatal Care	791	38.3	0.97	1992	727	36.9	1.05	1993	652	33.7	1.05	1994
Low Birth Weight	161	7.8	0.87	1992	170	8.6	0.92	1993	166	8.6	0.93	1994
Readiness and Early School Performance												
1st Grade "Not Ready"	478	22.5	0.85	1990-91	529	25.3	0.91	1992-93	570	25.9	0.92	1994-95
1st Grade Failures	229	10.8	1.20	1991-92	210	10.9	1.12	1992-93	139	6.4	0.94	1994-95
Failures Grades 1-3 (approx. %)	320	15.7	1.11	1991-92	261	14.0	0.98	1992-93	189	8.9	0.79	1994-95
Overage for Grade 3	458	25.4	0.98	1991-92	425	21.9	1.07	1993-94	341	17.1	1.06	1995-96
School Achievement												
Grade 4 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	258	13.7	0.71	1991-92	279	15.1	0.76	1993-94	498	25.1	0.90	1995-96*
Grade 8 BSAP - Math (Below Standards)	429	24.0	0.89	1991-92	422	22.4	0.72	1993-94	495	24.6	0.71	1995-96
Grade 8 BSAP - Reading (Below Standards)	337	18.9	0.77	1991-92	453	24.1	0.84	1993-94	467	23.3	0.81	1995-96
Grade 9 Stanford (At or below 25th percentile) * after 1995 changed to Metropolitan	266	14.2	0.65	1991-92	321	16.8	0.69	1993-94	469	23.7	0.80	1995-96*
Exit Exam (Not passing all parts on 1st attempt)	351	25.0	0.80	1991-92	378	25.6	0.78	1993-94	476	29.0	0.82	1995-96
Adolescent Risk Behavior												
Pregnancy (Women ages 14 - 17)	184	4.4	0.94	1992	162	3.8	0.84	1993	185	4.3	0.90	1994
Alcohol Use (High School)	2,375	43.4	1.08	1989-90					1,888	35.2	0.94	1992-93
Drug Use (High School)	918	16.8	1.25	1989-90					767	14.3	1.12	1992-93*
Binge Drinking (5 or more drinks)		17.7	1.13	1989-90					901	16.8	1.03	1992-93